

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000033429

Entity Name: EDUSYNERGY, LLC

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6270 WEST 5 LANE  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

6270 WEST 5 LANE  
HIALEAH, FL 33012

**New Mailing Address:**

FEI Number: 30-0410791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

PENA, ILIANA D  
6270 WEST 5 LANE  
HIALEAH, FL 33012 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GIMENEZ, ANNIEE  
Address: 9591 FONTAINBLEAU BLVD #406  
City-St-Zip: MIAMI, FL 33172 US

Title: DIR  
Name: DEJESUS-ROHENA, LOURDES  
Address: 6391 SCOTT STREET  
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: V.P.  
Name: PENA, SERGIO A  
Address: 6270 WEST 5TH LANE  
City-St-Zip: HIALEAH, FL 33012 US

Title: TRE  
Name: PENA, MARISHA  
Address: 6270 WEST 5TH LANE  
City-St-Zip: HIALEAH, FL 33012

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANNIEE GIMENEZ

MGRM

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date