## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000051930

17915 GOLDEN MEADOW COURT

DAVIDSON, NC 23086 NC

Address:

City-St-Zip:

Entity Name: BRAZILIAN LAW INTERNATIONAL COLLEGE, LLC

FILED Apr 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12266 GRAY BIRCH CIRCLE ORLANDO, FL 32832 **Current Mailing Address: New Mailing Address:** 17915 GOLDEN MEADOW COURT DAVIDSON, NC 28036 FEI Number: 26-2799912 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAURA, JEFFREY T 12266 GRAY BIRCH CIRCLE ORLANDO, FL 32832 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete AMERICO DE FREITAS, ALFREDO Name: Name: CLSW 300 B BLOCO, 1 APTO 113 SUDOESTE Address: Address: City-St-Zip: BRASILIA, DF 70673073 BR City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SANTOS DA SILVA, ASSIS Name: Name: Address: SQN 108 BLOCO F APTO, 101 ASA NORTE Address: City-St-Zip: BRASILIA, DF 70744060 BR City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DA SILVA NETO, FRANCISCOASSIS C Name: Name: Address: RUA SALOME DAMASIO JACQUES N.90 APTO. 303 Address: City-St-Zip: FLORIANOPOLIS, SC 88036650 BR City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: DA SILVA ANTUNES, DANIEL Name: SHTN TRECHO 1 LOTE 2 BLOCO 1-04 APTO. 101 Address: Address: City-St-Zip: BRASILIA, DF 70800200 BR City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SAURA, JANET M Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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.

Address:

City-St-Zip:

SIGNATURE: JANET M. SAURA MGRM 04/30/2009