

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000072523

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: AMERICAN TRAINING COMPANY, LLC

## Current Principal Place of Business:

450 E. LAS OLAS BLVD  
730  
FT LAUDERDALE, FL 33301

## New Principal Place of Business:

1825 MAIN STREET  
SUITE 43  
WESTON, FL 33326

## Current Mailing Address:

450 E. LAS OLAS BLVD  
730  
FT LAUDERDALE, FL 33301

## New Mailing Address:

1825 MAIN STREET  
SUITE 43  
WESTON, FL 33326

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUALITY TRAINING COMPANY, LLC  
450 E. LAS OLAS BLVD  
730  
FT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

QUALITY TRAINING COMPANY, LLC  
1825 MAIN STREET  
SUITE 43  
WESTON, FL 33326 US

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:

03/21/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: QUALITY TRAINING COM, PANY  
Address: 450 E. LAS OLAS BLVD SUITE 730  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGR ( ) Delete  
Name: RIOS, DAVID A  
Address: 450 E. LAS OLAS BLVD SUITE 730  
City-St-Zip: FORT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: QUALITY TRAINING COM, PANY  
Address: 1825 MAIN STREET  
City-St-Zip: WESTON, FL 33326

Title: MGR (X) Change ( ) Addition  
Name: RIOS, DAVID A  
Address: 1825 MAIN STREET  
City-St-Zip: WESTON, FL 33326

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.

SIGNATURE: JONATHAN BROOKS

CFO

03/21/2009

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