

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000078227

FILED
Apr 16, 2012
Secretary of State

Entity Name: THE SUCCESS EMPOWERMENT INSTITUTE (THESEI) LLC

Current Principal Place of Business:

THE CENTRE- 9900 STIRLING ROAD
2ND FLOOR
COOPER CITY, FL 33024

New Principal Place of Business:

Current Mailing Address:

THE CENTRE- 9900 STIRLING ROAD
SUITE # 408
COOPER CITY, FL 33024

New Mailing Address:

FEI Number: 80-0638623 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, NICOLE L MS.
THE CENTRE- 9900 STIRLING ROAD
SUITE # 408
COOPER CITY, FL 33024 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: CARTER, NICOLE L MS.
Address: THE CENTRE- 9900 STIRLING ROAD, 2ND FLOOR
City-St-Zip: COOPER CITY, FL 33024 US

Title: MGRM
Name: WASSERMAN, KELLY G MRS.
Address: THE CENTRE- 9900 STIRLING ROAD, 2ND FLOOR
City-St-Zip: COOPER CITY, FL 33024 US

Title: MGRM
Name: CUNNINGHAM, MATTHEW L MR.
Address: THE CENTRE- 9900 STIRLING ROAD, 2ND FLOOR
City-St-Zip: COOPER CITY, FL 33024 US

Title: MGRM
Name: CHAO, SAMUEL C MR.
Address: THE CENTRE- 9900 STIRLING ROAD, 2ND FLOOR
City-St-Zip: COOPER CITY, FL 33024 US

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: NICOLE L. CARTER

VP

04/16/2012

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