

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 18, 2011  
Secretary of State**

DOCUMENT# L10000111380

Entity Name: VANGUARD SENSORY EXPERIENCE, LLC

**Current Principal Place of Business:**

1550 BRICKELL AVE  
A402  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

1550 BRICKELL AVE  
A402  
MIAMI, FL 33129

**New Mailing Address:**

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

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

GARCIA RUIZ, INGRID A  
1550 BRICKELL AVE  
A402  
MIAMI, FL 33129 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: GARCIA RUIZ, INGRID A  
Address: 1550 BRICKELL AVE APT A402  
City-St-Zip: MIAMI, FL 33129

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: INGRID GARCIA RUIZ MGRM 04/18/2011

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