2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2012
Secretary of State

DOCUMENT# L11000020543

Entity Name: KINETIC INSTITUTE OF COMPLETE KNOWLEDGE LLC

Current Principal Place of Business:

220 NW 87 AVE. #K218
MIAMI, FL 33172

New Principal Place of Business:

220 NW 87 AVE. #K218
I, FL 33172

Current Mailing Address:

220 NW 87 AVE. #K218
MIAMI, FL 33172

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:

CACERES, LEONOR
220 NW 87 AVE. #K218
MIAMI, FL 33172 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: CACERES, RICARDO
Address: 220 NW 87 AVE. #K218
City-St-Zip: MIAMI, FL 33172

Title: MGR
Name: BEBLEY, BRIAN
Address: 28437 MEADOWRUSH WAY
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: MGR
Name: BEBLEY, SANDRA
Address: 28437 MEADOWRUSH WAY
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: MGR
Name: CACERES, LEONOR
Address: 220 NW 87 AVE. #K218
City-St-Zip: MIAMI, FL 33172

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 Statues.

SIGNATURE: RICARDO CACERES MR. 05/01/2012

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