

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000971

Entity Name: KOLEGIO LLC

FILED
Mar 21, 2006
Secretary of State

Current Principal Place of Business:

9 EAST LOCKERMAN STREET, SUITE 205
DOVER, DE 19901

New Principal Place of Business:

200 SOUTH BISCAYNE BLVD
1150
MIAMI, FL 33131 US

Current Mailing Address:

9 EAST LOCKERMAN STREET, SUITE 205
DOVER, DE 19901

New Mailing Address:

200 SOUTH BISCAYNE BLVD
1150
MIAMI, FL 33131 US

FEI Number: 20-1973258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OROZCO, ULISES I
6930 NW 179TH ST., UNIT 406
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

OROZCO, ULISES I
200 SOUTH BISCAYNE BLVD.
SUITE 1150
MIAMI, FL 33131 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: ULISES I OROZCO

03/21/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OROZCO, ULISES I
Address: 6930 NW 179TH ST., UNIT 406
City-St-Zip: MIAMI, FL 33015

Title: MGRM () Delete
Name: VORGAS, FERNANDO JR
Address: 8852 ABBOTT AVENUE
City-St-Zip: SURFSIDE, FL 33154

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: VARGAS, FERNANDO JR
Address: 8852 ABBOTT AVENUE
City-St-Zip: SURFSIDE, FL 33154

I hereby certify that the information supplied with this filing does not qualify for the 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: ULISES I. OROZCO

MGRM

03/21/2006

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