

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000086613

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** LANGUAGE INSTITUTE INTERNATIONAL, INC.

**Current Principal Place of Business:**

927 VIREO DRIVE  
BAREFOOT BAY, FL 32976 US

**New Principal Place of Business:**

**Current Mailing Address:**

927 VIREO DRIVE  
BAREFOOT BAY, FL 32976 US

**New Mailing Address:**

**FEI Number:** 26-3511082

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HORSFALL, BRUCE  
927 VIREO DRIVE  
BAREFOOT BAY, FL 32976 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** JIAN LI, ZHOU  
**Address:** 927 VIREO DRIVE  
**City-St-Zip:** BAREFOOT BAY, FL 32976 US

**Title:** S, D  
**Name:** HORSFALL, BRUCE  
**Address:** 927 VIREO DRIVE  
**City-St-Zip:** BAREFOOT BAY, FL 32976 US

**Title:** T  
**Name:** HORSFALL, BRUCE  
**Address:** 927 VIREO DRIVE  
**City-St-Zip:** BAREFOOT BAY, FL 32976 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** BRUCE HORSFALL

S.T.

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date