2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2014
Secretary of State
CC2088894031

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Entity Name: ALL-INCLUSIVE SUMMER CAMP, LLC

Current Principal Place of Business:

1530 SW 149 AVE
MIAMI, FL 33194

Current Mailing Address:

1530 SW 149 AVE
MIAMI, FL 33194 US

FEI Number: 27-1929706

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VARGAS, LILI
1530 SW 149 AVE.
MIAMI, FL 33194 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	VARGAS, LILI M DR.
Address	1530 SW 149 AVE.
City-State-Zip:	MIAMI FL 33194

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LILI M. VARGAS MANAGER 04/23/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date