

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000104366

Entity Name: VAMOS SPANISH ACADEMY, LLC

Current Principal Place of Business:

2121 PONCE DE LEON BLVD., SUITE 1050
CORAL GABLES, FL 33134

Current Mailing Address:

2121 PONCE DE LEON BLVD., SUITE 1050
CORAL GABLES, FL 33134

FEI Number: 27-3621239

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD., SUITE 1050
CORAL GABLES, FL 33134 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 MGRM
Name SO, INGRID
Address 2121 PONCE DE LEON BLVD., SUITE 1050
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name SUAREZ-COTONAT, ALEJANDRO
Address 2121 PONCE DE LEON BLVD., SUITE 1050
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name WHITTLE, WILLIAM JR
Address 9152 TERRAMORE
City-State-Zip: ORANGEVALE CA 95662

Title MGRM
Name ELKIND, KATHERINE
Address 2121 PONCE DE LEON BLVD. STE 1050
City-State-Zip: CORAL GABLES FL 33134

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUAREZ-COTONAT , ALEJANDRO

MGRM

04/26/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date