

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000085510

Entity Name: CAROUSEL DAY CARE CENTER, INC.

Current Principal Place of Business:

470 NW 22 AVE
MIAMI, FL 33125

Current Mailing Address:

470 NW 22 AVE
MIAMI, FL 33125 US

FEI Number: 65-1038945

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VALDES, INOCENTA
3040 SW 15 STREET
MIAMI, FL 33145 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

Officer/Director Detail :

Title	VP	Title	P
Name	DILME, KAYLA	Name	VALDES, INOCENTA
Address	3040 SW 15 ST	Address	3040 SW 15 ST
City-State-Zip:	MIAMI FL 33145	City-State-Zip:	MIAMI FL 33145
Title	S		
Name	VALDES-DILME, CARIDAD		
Address	470 NW 22 AVE		
City-State-Zip:	MIAMI FL 33125		

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: INOCENTA VALDES

PRESIDENT

04/02/2019

Electronic Signature of Signing Officer/Director Detail

Date