

2016 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 PVP
Name DILME, KAYLA
Address 470 NW 22 AVE.
City-State-Zip: MIAMI FL 33125

Title VPS
Name VALDES, INOCENTA
Address 3040 SW 15 ST
City-State-Zip: MIAMI FL 33145

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: KAYLA DILME

PRESIDENT

04/26/2016

Electronic Signature of Signing Officer/Director Detail

Date