

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000036507

**Entity Name:** ELITE ADULT DAY CARE CENTER INC

**Current Principal Place of Business:**

2050 W 56 STREET  
BAY 29 AND 30  
HIALEAH, FL 33016

**Current Mailing Address:**

2050 W 56 STREET  
BAY 29 AND 30  
HIALEAH, FL 33016 US

**FEI Number:** 45-1675941

**Certificate of Status Desired:** No

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

BATISTA, TANIA  
2050 W 56 STREET  
BAY 29 AND 30  
HIALEAH, FL 33016 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 P  
Name FIGUEREDO, OSIEL  
Address 2050 W 56 STREET BAY 29 AND 30  
City-State-Zip: HIALEAH FL 33016

Title VP  
Name BATISTA, TANIA C  
Address 2050 W 56 STREET BAY 29 AND 30  
City-State-Zip: HIALEAH FL 33016

*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:** TANIA BATISTA

VP

06/10/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date