

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000105229

**Entity Name:** CARITAS ALEGRES ADULT DAY CARE, INC.

**Current Principal Place of Business:**

2407 NW 7 STREET  
MIAMI, FL 33125

**Current Mailing Address:**

2407 NW 7 STREET  
MIAMI, FL 33125

**FEI Number:** 45-4019704

**Certificate of Status Desired:** No

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

LIMA HERRERA, SILVIA  
2407 NW 7 STREET  
MIAMI, FL 33125 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:** LIMA HERRERA,SILVIA

03/23/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LIMA HERRERA, SILVIA  
Address        2407 NW 7 STREET  
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:** SILVIA LIMA HERRERA

03/23/2016

Electronic Signature of Signing Officer/Director Detail

Date