

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000042832

Entity Name: A PLACE FOR YOU ADULT DAY CARE AND REHAB CENTER
CORP.

FILED
Apr 28, 2015
Secretary of State
CC3034228568

Current Principal Place of Business:

4996 10TH AVENUE NORTH HAVERHILL ROAD
GREENACRES, FL 33463

Current Mailing Address:

4996 10TH AVENUE NORTH HAVERHILL ROAD
GREENACRES, FL 33463 US

FEI Number: 46-2790084

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ, YONIEL
281 E 56 ST
HIALEAH, FL 33013 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 | Title | VP |
| Name | PEREZ, CAELY M | Name | GONZALEZ, YONIEL |
| Address | 2061 VINNINGS CIRCLE APT. 1402 | Address | 281 E 56 ST. |
| City-State-Zip: | WELLINGTON FL 33414 | City-State-Zip: | HIALEAH FL 33013 |

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: CAELY M. PEREZ

PRESIDENT

04/28/2015

Electronic Signature of Signing Officer/Director Detail

Date