

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000025563

**Entity Name:** SERENITY LIFE ADULT DAY CARE CENTER, INC.

**Current Principal Place of Business:**

5625 W WATERS AVE  
SUITE G  
TAMPA, FL 33634

**Current Mailing Address:**

5625 W WATERS AVE  
SUITE G  
TAMPA, FL 33634 US

**FEI Number:** 46-5150179

**Certificate of Status Desired:** No

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

WONG, YVONNE  
5625 W WATERS AVE  
SUITE G  
TAMPA, FL 33634 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 WONG, YVONNE  
Address 5625 W WATERS AVE  
SUITE G  
City-State-Zip: TAMPA FL 33634

*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:** YVONNE WONG

**PRESIDENT**

**01/30/2022**

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

\_\_\_\_\_  
Date