

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000039162

Entity Name: AVILA CARE CORPORATION

Current Principal Place of Business:

4400 W 16 AVE
APT 533
HIALEAH, FL 33012

Current Mailing Address:

4400 W 16 AVE
APT 533
HIALEAH, FL 33012 US

FEI Number: 81-2466351

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AVILA, YARABIT
4400 W 16 AVE
APT 533
HIALEAH, FL 33012 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 AVILA, YARABIT
Address 4400 W 16 AVE APT 533
City-State-Zip: HIALEAH FL 33012

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: YARABIT AVILA

P

04/10/2018

Electronic Signature of Signing Officer/Director Detail

Date