

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000067029

**Entity Name:** MARILIN ADULT LIVING FACILITY INC.

**Current Principal Place of Business:**

7312 S.W. 16TH STREET  
MIAMI, FL 33155

**Current Mailing Address:**

7312 S.W. 16TH STREET  
MIAMI, FL 33155

**FEI Number:** 65-0939216

**Certificate of Status Desired:** No

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

PEREZ, TATIANA  
15855 SW 55 TERRACE  
MIAMI, FL 33185 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, TATIANA	Name	PEREZ, CARLOS
Address	15855 SW 55 TERRACE	Address	15855 SW 55 TERRANCE
City-State-Zip:	MIAMI FL 33185	City-State-Zip:	MIAMI FL 33185

*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:** TATIANA PEREZ

**PRESIDENT**

**04/25/2014**

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

\_\_\_\_\_  
Date