

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000049776

Entity Name: L & L HEALTH CARE AGENCY LLC

Current Principal Place of Business:

20401 NW 2 AVE
210
MIAMI, FL 33169

FILED
Feb 07, 2013
Secretary of State
CC1609417228

Current Mailing Address:

20401 NW 2 AVE
210
MIAMI, FL 33169

FEI Number: 27-0220876

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PIERRE, MARIE-LUCIE
1343 NW 206 TER
MIAMI GARDEN, FL 33169 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

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	PIERRE, MARIE-LUCIE	Name	GALUMETTE, LYSMOND
Address	1343 NW 206 TER	Address	1343 NW 206 TER
City-State-Zip:	MIAMI GARDEN FL 33169	City-State-Zip:	MIAMI GARDEN FL 33169

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LYSMOND GALUMETTE

MS

02/07/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date