

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000097540

Entity Name: STELLATO-PEREZ HEALTH CARE LLC

Current Principal Place of Business:

17150 NE 19TH AVE
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

17150 NE 19TH AVE
NORTH MIAMI BEACH, FL 33162

FEI Number: 27-1085272

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STELLATO, MARIA E
472 NE 121 S
BISCAYNE PARK, FL 33161 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 MGRM
Name STELLATO, MARIA E
Address 472 NE 121 ST
City-State-Zip: BISCAYNE PARK FL 33161

Title MGRM
Name PEREZ, ADRIANA M
Address 820 SW 105 AVE. APT # 614
City-State-Zip: MIAMI FL 33174

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: MARIA E STELLATO

MGRM

07/10/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date