

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000046933

**Entity Name:** SENIORS GARDEN ADULT DAYCARE, LLC

**Current Principal Place of Business:**

6900 W 32 AVE  
STE 1,2,3  
HIALEAH, FL 33018

**Current Mailing Address:**

6900 W 32 AVE  
STE 1,2,3  
HIALEAH, FL 33018 US

**FEI Number:** 46-2415620

**Certificate of Status Desired:** No

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

TORREZ, CAROL  
7672 W 30 LN  
HIALEAH, FL 33018 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  
Name TORREZ, CAROL  
Address 7672 W 30 LN  
City-State-Zip: HIALEAH FL 33018

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CAROL TORREZ

**ADMINISTRATOR**

**09/09/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date