

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000093629

**Entity Name:** 7 STARS QUALITY HEALTHCARE, LLC

**Current Principal Place of Business:**

7761 SW 145TH STREET  
MIAMI, FL 33158

**Current Mailing Address:**

7761 SW 145TH STREET  
MIAMI, FL 33158

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ASSAPIMONWAIT, SIRICHAJ  
7761 SW 145TH STREET  
MIAMI, FL 33158 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 ASSAPIMONWAIT, BEATRIZ  
Address 7761 SW 145TH STREET  
City-State-Zip: MIAMI FL 33158

*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:** BEATRIZ ASSAPIMONWAIT

CEO

03/19/2014

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

\_\_\_\_\_ Date