

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000149147

**FILED  
May 10, 2017  
Secretary of State  
CC0530972068**

**Entity Name:** ISER ADULT DAY CARE LLC

**Current Principal Place of Business:**

650 PALM AVE  
UNIT # 3  
HIALEAH, FL 33010

**Current Mailing Address:**

650 PALM AVE  
UNIT # 3  
HIALEAH, FL 33010

**FEI Number:** 81-3711763

**Certificate of Status Desired:** Yes

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

ISER, RICHARD J  
650 PALM AVE  
UNIT # 3  
HIALEAH, FL 33010 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 ISER, RICHARD J  
Address 650 PALM AVE  
City-State-Zip: HIALEAH FL 33010

Title MGR  
Name ISER, ARLENE M  
Address 650 PALM AVE  
City-State-Zip: HIALEAH FL 33010

Title MANAGER  
Name MOORE, ROOSEVELT JR.  
Address 650 PALM AVE  
UNIT # 3  
City-State-Zip: HIALEAH FL 33010

*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:** RICHARD J ISER

**MANAGER**

**05/10/2017**

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

\_\_\_\_\_  
Date