

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000221443

Entity Name: BELEN ADULT DAY CARE, LLC

Current Principal Place of Business:

8510 SW 4TH ST
MIAMI, FL 33144

Current Mailing Address:

8510 SW 4TH ST
MIAMI, FL 33144 US

FEI Number: 81-4629188

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALEX P. MARTINEZ, C.P.A., P.A.
300 ARAGON AVE STE 210
CORAL GABLES, FL 33134 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 PRESIDENT
Name PENATE, ZONIA
Address 8510 SW 4TH ST
City-State-Zip: MIAMI FL 33144

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: ZONIA PENATE

P

04/22/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date