

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000276240

Entity Name: PARADISE BAY CARE, LLC

Current Principal Place of Business:

3550 W WATERS AVE
260
TAMPA, FL 33614

Current Mailing Address:

3550 W WATERS AVE
260
TAMPA, FL 33614 US

FEI Number: 83-2670712

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODRIGUEZ, MADELAINE
4545 W IDLEWILD AVE
TAMPA, FL 33614 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 RODRIGUEZ, MADELAINE
Address 4545 W IDLEWILD AVE
City-State-Zip: TAMPA FL 33614

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: MADELAINE RODRIGUEZ

MGR

04/17/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date