

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000467505

Entity Name: TAMPA BAY HEALTH CARE & REHABILITATION CENTER, LLC

Current Principal Place of Business:

6107 MEMORIAL HWY
SUITE G
TAMPA, FL 33615

Current Mailing Address:

6107 MEMORIAL HWY
SUITE G
TAMPA, FL 33615 US

FEI Number: 87-3344570

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ, YAMEL
12906 WORCHESTER AVENUE
TAMPA, FL 33624 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: YAMEL GONZALEZ

03/03/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GONZALEZ, YAMEL
Address 12906 WORCHESTER AVENUE
City-State-Zip: TAMPA FL 33624

Title VP
Name RODRIGUEZ, JOEL
Address 6107 MEMORIAL HWY
SUITE G
City-State-Zip: TAMPA FL 33615

Title DIRECTOR
Name ARAP, SILVIA
Address 6107 MEMORIAL HWY
SUITE G
City-State-Zip: TAMPA FL 33615

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: SILVIA ARAP

DIRECTOR

03/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date