

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000255604

**Entity Name:** APOLLO HOME CARE LLC

**Current Principal Place of Business:**

1615 SOUTH CONGRESS AVENUE  
SUITE 109  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

1615 SOUTH CONGRESS AVENUE  
SUITE 109  
DELRAY BEACH, FL 33445 US

**FEI Number:** 93-1964791

**Certificate of Status Desired:** No

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

DEEB, KEVIN L ESQ.  
310 ALHAMBRA CIRCLE  
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 MGR  
Name APOLLO HOME ONE LLC  
Address 310 ALHAMBRA CIRCLE  
City-State-Zip: CORAL GABLES FL 33134

*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:** BENJAMIN A SARDINAS

MGR

03/02/2024

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

\_\_\_\_\_ Date