2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018614

Current Principal Place of Business:

Entity Name: CLASSIC CARE FOR YOU, LLC

FILED Feb 10, 2005 Secretary of State

17395 NORTH BAY ROAD 19820 WEST DIXIE HWY #200A NORTH MIAMI, FL 33160 NORTH MIAMI BEACH, FL 33160 **New Mailing Address: Current Mailing Address:** 17395 NORTH BAY ROAD #200A NORTH MIAMI BEACH, FL 33160 FEI Number: 11-3602273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REGISTERED AGENTS LEGAL SERVICES, INC. 1333 NORTH DUVAL STREET TALLAHASSEE, FL 32302 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 MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGR

() Delete Name:

BURGOS, NYDIA Address:

17395 NORTH BAY ROAD @200A City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGR () Delete Name: TERRY, ADLER

Address: 17395 NORTH BAY ROAD #200A City-St-Zip: NORTH MIAMI, FL 33160

() Change () Addition

New Principal Place of Business:

Title: () Change () Addition

Name: Address: City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: TERRY ADLER 02/10/2005