

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000016456

FILED
Apr 29, 2011
Secretary of State

Entity Name: M.G. PROFESSIONAL CARE, LLC

Current Principal Place of Business:

11145 NW 58 PL
HIALEAH, FL 33012

New Principal Place of Business:

11145 NW 58 PL
HIALEAH, FL 33012 UN

Current Mailing Address:

11145 NW 58 PL
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 26-4338014 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GARCIA, MARIELYS
11145 NW 58 PL
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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/MANAGERS:

Title: MGRM
Name: GARCIA, MARIELYS
Address: 11145 NW 58 PL
City-St-Zip: HIALEAH, FL 33012

I hereby 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: MARIELYS GARCIA PRES 04/29/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date