

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000044249

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** PARADISE SENIOR CENTER LLC

**Current Principal Place of Business:**

2169 WEST FLAGLER STREET  
MIAMI, FL 33135

**New Principal Place of Business:**

3599 NW 7ST  
MIAMI, FL 33125

**Current Mailing Address:**

2169 WEST FLAGLER STREET  
MIAMI, FL 33135

**New Mailing Address:**

3599 NW 7ST  
MIAMI, FL 33125

**FEI Number:** 27-2423076

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTELL, INDIRA  
2169 WEST FLAGLER STREET  
MIAMI, FL 33135 US

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

MARTELL, INDIRA  
3599 NW 7ST  
MIAMI, FL 33125 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:

01/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: MARTELL, INDIRA  
Address: 3599 NW 7ST  
City-St-Zip: MIAMI, FL 33125

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: INDIRA MARTELL

P

01/05/2012

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