

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000104166

FILED
Apr 25, 2011
Secretary of State

Entity Name: MIRACLE LIFE ADULT DAYCARE CENTER, LLC

Current Principal Place of Business:

5400 S. BISCAYNE DR
SUITE F
NORTH PORT, FL 34287 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7485
NORTH PORT, FL 34290 US

New Mailing Address:

FEI Number: 80-0652745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATCHIN, MIRA
416 HACIENDA ST
NORTH PORT, FL 34287 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: P
Name: MATCHIN, MIRA
Address: 416 HACIENDA ST
City-St-Zip: NORTH PORT, FL 34287

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: MIRA MATCHIN

P

04/25/2011

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