

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000044691

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** OJIWE GENTLE CARE OF S FL LLC

**Current Principal Place of Business:**

7743 HAMPTON BLVD  
UNIT 7743  
NORTH LAUDERDALE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

7743 HAMPTON BLVD  
UNIT 7743  
NORTH LAUDERDALE, FL 33068

**New Mailing Address:**

**FEI Number:** 77-0661822

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MVP TAX AND ACCOUNTING INC  
1395 W SUNRISE BLVD  
2  
FT LAUDERDALE, FL 33311 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: MGR  
Name: BIVENS, ALONDA T  
Address: 7743 HAMPTON BLVD, UNIT 7743  
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

Title: MGRM  
Name: HICKS, IYSIA G  
Address: 7743 HAMPTON BLVD, UNIT 7743  
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

Title: MGRM  
Name: HICKS, CAMERON T  
Address: 7743 HAMPTON BLVD, UNIT 7743  
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

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: ALONDA BIVENS

MGR

05/01/2012

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