## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M07000005747

Entity Name: M & Y CARE, LLC

City-St-Zip:

WEST BLOOMFIELD, MI 48323

FILED Jan 05, 2009 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 1001 N. FEDERAL HWY 340 HALLANDALE, FL 33009 **Current Mailing Address: New Mailing Address:** 29532 SOUTHFIELD RD 202 SOUTHFIELD, MI 48076 FEI Number: 20-4653141 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: KERIMOVA, DIANA 1001 N FEDERAL HWY STE 340 HALLANDALE, FL 33009 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete TURBOVSKY, DMITRY Name: Name: Address: 5175 OAKBROOKE DR Address: City-St-Zip: WEST BLOOMFIELD, MI 48323 City-St-Zip: Title: MS () Delete Title: () Change () Addition TURBOVSKY, YANA Name: Name: Address: 5175 OAKBROOKE DR Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DMITRY TURBOVSKY MR 01/05/2009