2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N37389

1. Entity Name

TENDER LOVING CARE LIFE SAVING CENTER, INC.

FILED
02 APR 22 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1205 1215 NW 79TH STREET MIAMI FL 33150	14015 N.W. 17TH AVENUE MIAMI FL 33167

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0188482 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MUSGROVE, ALMADA 14015 N.W. 17TH AVENUE MIAMI FL 33167	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 Almada Musgrove 04-22-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 12, 2001, min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MUSGROVE, ALMADA 14015 N.W. 17TH AVENUE MIAMI FL 33167	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Additio
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HALEY, DELPHA 10899 NW 12TH CT. MIAMI FL 33167	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Additio
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC MUSGROVE, ARTGLEE 14015 N.W. 17TH AVENUE MIAMI FL 33167	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Additio
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FORBES, LYDIA 1146 N.W. 104 ST. MIAMI FL 33150	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Additio
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GAINOUS, GERALDINE 15120 N.W. 31 AVENUE MIAMI FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Additio
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Additio

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Almada Musgrove 04-22-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850)205-0384

From:

Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305)358-2571
Fax Number : (305)358-7832

CORPORATION REINSTATEMENT

TENDER LOVING CARE LIFE SAVING CENTER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$297.50