2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000118582

FILED Feb 07, 2005 Secretary of State

Entity Nan	ne: TENDER	LOVING CARE ASSISTED LI	VING FACILITY OF FLORIDA, IN	C.	
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3100 SW 7 MIAMI, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
3100 SW 7 MIAMI, FL					
FEI Number:	16-1647414	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
LOPEZ, ASIS 3100 SW 79TH AVE MIAMI, FL 33155 US			NUNEZ, JAVIER 3100 SW 79TH AVE MIAMI, FL 33155 U	3100 SW 79TH AVE	
The above in the State	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JNB				02/07/2005	
Election Can		nic Signature of Registered Agr	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () CRUZ, DAMAR 3100 SW 79TH MIAMI, FL 331	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () NUNEZ, JAVIEI 3100 SW 79TH MIAMI, FL 331	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JNB VΡ 02/07/2005