

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060788

FILED
Mar 15, 2011
Secretary of State

Entity Name: THERAPEUTIC CARE CENTER, INC

Current Principal Place of Business:

14730 NE 10 AVE
MIAMI, FL 33161 US

New Principal Place of Business:

Current Mailing Address:

14730 NE 10 AVE
MIAMI, FL 33161 US

New Mailing Address:

FEI Number: 65-0620350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, OLGA AWILDA
14730 NE 10TH AVE
MIAMI, FL 33161 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

OFFICERS AND DIRECTORS:

Title: P
Name: RIVERA, OLGA AWILDA
Address: 14730 NE 10TH AVE
City-St-Zip: MIAMI, FL 33161 US

I hereby 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 all other like empowered.

SIGNATURE: OLGA AWILDA RIVERA

P

03/15/2011

Electronic Signature of Signing Officer or Director

Date