

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070993

FILED  
Apr 12, 2006  
Secretary of State

Entity Name: SWEET LIVING FACILITY INC.

## Current Principal Place of Business:

15505 SW 16TH LANE  
MIAMI, FL 33194

## New Principal Place of Business:

15505 SW 16TH LANE  
MIAMI, FL 33185

## Current Mailing Address:

15505 SW 16TH LANE  
MIAMI, FL 33194

## New Mailing Address:

15505 SW 16TH LANE  
MIAMI, FL 33185

FEI Number: 14-1912087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUINONEZ, CLAUDIA M  
15505 SW 16TH LANE  
MIAMI, FL 33194 US

## Name and Address of New Registered Agent:

QUINONEZ, CLAUDIA M  
15505 SW 16TH LANE  
MIAMI, FL 33185 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:

04/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: QUINONEZ, CLAUDIA M  
Address: 15505 SW 16TH LANE  
City-St-Zip: MIAMI, FL 33194

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: QUINONEZ, CLAUDIA M  
Address: 15505 SW 16TH LANE  
City-St-Zip: MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CLAUDIA QUINONEZ

PD

04/12/2006

Electronic Signature of Signing Officer or Director

Date