2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2012
Secretary of State

DOCUMENT# P08000089369

Entity Name: FOUR SEASONS ELDER CARE ALF, INC.

Current Principal Place of Business:

6625 MIAMI LAKEWAY SOUTH
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

6625 MIAMI LAKEWAY SOUTH
MIAMI LAKES, FL 33014

New Mailing Address:

1770 WEST 84 STREET
HIALEAH, FL 33014

FEI Number: 26-3581177 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOLER, ORESTES E JR.
1770 WEST 84 STREET
HIALEAH, FL 33014 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, T
Name: SOLER, AIDA
Address: 1770 WEST 84 STREET
City-St-Zip: HIALEAH, FL 33014

Title: S
Name: SOLER, AIDA
Address: 1770 WEST 84 STREET
City-St-Zip: HIALEAH, FL 33014

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: AIDA SOLER PRES 03/14/2012

Electronic Signature of Signing Officer or Director Date