

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000081612

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Entity Name:** UNLIMITED ADULT DAY CARE CORP

**Current Principal Place of Business:**

13655 NE 15CT  
MIAMI, FL 33161 US

**New Principal Place of Business:**

**Current Mailing Address:**

13655 NE 15CT  
MIAMI, FL 33161 US

**New Mailing Address:**

**FEI Number:** 27-3611713

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JEAN MAITRE, GERARD P  
13655 NE 15CT  
MIAMI, FL 33161 US

**Name and Address of New Registered Agent:**

AUGUSTE, JENNIFER P  
13655 NE 15CT  
MIAMI, FL 33161 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: AUGUSTE JENNIFER

03/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: AUGUSTE, FRIDA  
Address: 13655 NE 15CT  
City-St-Zip: MIAMI, FL 33161 US

Title: VP  
Name: JEAN MAITRE, GERARD  
Address: 13655 NE 15CT  
City-St-Zip: MIAMI, FL 33161

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: AUGUSTE JENNIFER

P

03/23/2012

Electronic Signature of Signing Officer or Director

Date