

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000010232

**Entity Name:** ILIANA'S FAMILY CHILD CARE, INC.

**Current Principal Place of Business:**

3517 SW 152 PLACE  
MIAMI, FL 33185

**Current Mailing Address:**

3517 SW 152 PLACE  
MIAMI, FL 33185

**FEI Number:** 20-0625842

**Certificate of Status Desired:** Yes

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

HERNANDEZ, ILIANA  
3517 SW 152 PLACE  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	V
Name	HERNANDEZ, ILIANA	Name	HERNANDEZ, DAVID D
Address	3517 SW 152 PLACE	Address	3517 SW 152 PLACE
City-State-Zip:	MIAMI FL 33185	City-State-Zip:	MIAMI FL 33185

*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:** ILIANA HERNANDEZ

**PRESIDENT**

**03/29/2015**

Electronic Signature of Signing Officer/Director Detail

Date