

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000043787

Entity Name: MALIBU LOVE AND CARE HEALTHCARE AGENCY, INC.

Current Principal Place of Business:

1468 SOUTH PALM AVENUE
PEMBROKE PINES, FL 33025

Current Mailing Address:

1468 SOUTH PALM AVENUE
PEMBROKE PINES, FL 33025

FEI Number: 16-1750312

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NICHOLAS, ROSEMARIE
1468 SOUTH PALM AVENUE
PEMBROKE PINES, FL 33025 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
Name JAIPaul, ELMINA
Address 16000 PINES BLVD., #821493
City-State-Zip: PEMBROKE PINES FL 33082-9239

Title VP
Name NICHOLAS, ROSEMARIE
Address 16000 PINES BLVD., #821493
City-State-Zip: PEMBROKE PINES FL 33082-9239

Title SEC
Name PARRAM, GINO
Address 16000 PINES BLVD., #821493
City-State-Zip: PEMBROKE PINES FL 33082-9239

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: ROSEMARIE NICHOLAS

OWNER

04/20/2017

Electronic Signature of Signing Officer/Director Detail

Date