

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000047402

Entity Name: L & B SOLUTION CARE INC.

Current Principal Place of Business:

565 NE 137TH STREET
MIAMI, FL 33161

Current Mailing Address:

565 NE 137TH STREET
MIAMI, FL 33161

FEI Number: 14-2003501

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NELSON, LEONIE
567 NE 137TH STREET
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PT	Title	VPS
Name	NELSON, LEONIE	Name	BOZOR, PIERRE O
Address	565 NE 137TH STREET	Address	565 NE 137TH STREET
City-State-Zip:	MIAMI FL 33161	City-State-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: LEONIE NELSON

ADMINISTRATOR

03/23/2015

Electronic Signature of Signing Officer/Director Detail

Date