

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000068114

Entity Name: DADE COUNTY ADULT LIVING FACILITY GROUP, CORP.

Current Principal Place of Business:

15135 SW 128 CT
MIAMI, FL 33186

Current Mailing Address:

15135 SW 128 CT
MIAMI, FL 33186

FEI Number: 26-3024308

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OTERO, JOSEFA
15135 SW 128 CT
MIAMI, FL 33186 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 OTERO, JOSEFA
Address 15135 SW 128 CT
City-State-Zip: MIAMI FL 33186

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: JOSEFA OTERO

OWNER/ADMINISTRATOR 04/06/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date