

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000097497

Entity Name: ELENA ASSISTED LIVING FACILITY, CORP.

Current Principal Place of Business:

1731 SW 11 ST
MIAMI, FL 33135

Current Mailing Address:

1530 SW 11 TERR
MIAMI, FL 33135

FEI Number: 26-3632306

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMIREZ, ELENA
1530 SW 11 TERR
MIAMI, FL 33135 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 PD
Name RAMIREZ, ELENA
Address 1731 SW 11 ST
City-State-Zip: MIAMI FL 33135

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: ELENA RAMIREZ

PD

02/19/2015

Electronic Signature of Signing Officer/Director Detail

Date