

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000074266

**Entity Name:** ASM DAY CARE INC.

**Current Principal Place of Business:**

6423 STIRLING RD  
DAVIE, FL 33314

**Current Mailing Address:**

6423 STIRLING RD  
DAVIE, FL 33314 US

**FEI Number:** 27-3422931

**Certificate of Status Desired:** No

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

MILAZZO, LETICIA  
6423 STIRLING RD  
DAVIE, FL 33314 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 MILAZZO, LETICIA  
Address 6423 STIRLING RD  
City-State-Zip: DAVIE FL 33314

*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:** LETICIA MILAZZO

**PRESIDENT**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date