

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000010422

Entity Name: ADELCARE II, INC**Current Principal Place of Business:**3206 CONWAY RD STE 5
ORLANDO, FL 32812-7316**Current Mailing Address:**3206 CONWAY RD STE 5
ORLANDO, FL 32812-7316 US**FEI Number:** 45-4409961**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MAEZTU II, VICTOR M
504 MOROCCO AVE
ORLANDO, FL 32807 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:** VICTOR M MAEZTU II

01/25/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	MAEZTU, JEANNETTE
Address	504 MOROCCO AVE
City-State-Zip:	ORLANDO FL 32807

Title	VICE PRESIDENT, FINANCIAL DIRECTOR
Name	MAEZTU II, VICTOR M
Address	504 MOROCCO AVE
City-State-Zip:	ORLANDO FL 32807

Title	ASST SECRETARY, ASSISTANT DIRECTOR
Name	NAVARRO, ILEANA
Address	523 SOUTHERN CHARM DR
City-State-Zip:	ORLANDO FL 32807-5074

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: VICTOR M MAEZTU II

VICE PRESIDENT

01/25/2018

Electronic Signature of Signing Officer/Director Detail

Date