

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000061646

Entity Name: VICTORIA NURSING & REHABILITATION CENTER, INC.

Current Principal Place of Business:

955 NW 3RD ST
MIAMI, FL 33128

Current Mailing Address:

955 NW 3RD ST
MIAMI, FL 33128

FEI Number: 31-1558831

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STACEY, RICHARD E
899 NW 4TH STREET
MIAMI, FL 33128 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 DP
Name STACEY, RICHARD E
Address 899 NW 4TH STREET
City-State-Zip: MIAMI FL 33128

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: RICHARD E STACEY

DP

03/16/2015

Electronic Signature of Signing Officer/Director Detail

Date