

**2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L12000046488

**Entity Name:** PALMETTO LAKES MEDICAL & REHAB CENTER LLC

**Current Principal Place of Business:**

85 GRAND CANAL DRIVE  
SUITE #301  
MIAMI, FL 33144

**Current Mailing Address:**

85 GRAND CANAL DRIVE  
SUITE #301  
MIAMI, FL 33144 US

**FEI Number:** 45-4965358

**Certificate of Status Desired:** No

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

MALDONADO, BEATRIZ YENI  
85 GRAND CANAL DRIVE  
SUITE #301  
MIAMI, FL 33144 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:** BEATRIZ MALDONADO

07/14/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name PEREZ, HORACIO  
Address 85 GRAND CANAL DRIVE  
SUITE #301  
City-State-Zip: MIAMI FL 33144

Title MGRM  
Name MALDONADO, BEATRIZ YENI  
Address 85 GRAND CANAL DRIVE  
SUITE #301  
City-State-Zip: MIAMI FL 33144

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BEATRIZ YENI MALDONADO

MGRM

07/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date