

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000006361

Entity Name: KIDS PARADISE HOME DAY CARE LLC

Current Principal Place of Business:

7725 JODI LYNN DR
TAMPA, FL 33615

Current Mailing Address:

7725 JODI LYNN DR
TAMPA, FL 33615

FEI Number: 84-4105939

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VEGA LEON, YUDISLEY
7725 JODI LYNN DR
TAMPA, FL 33615 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

Authorized Person(s) Detail :

Title MGR
Name VEGA LEON, YUDISLEY
Address 7725 JODI LYNN DR
City-State-Zip: TAMPA FL 33615

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: YUDISLEY VEGA LEON

MGR

01/31/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date