

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000062703

**Entity Name:** DREAMS ADULT DAYCARE LLC

**Current Principal Place of Business:**

1799 STATE ROAD 7  
UNIT 8  
MARGATE, FL 33063

**Current Mailing Address:**

937 SW 7 ST  
MIAMI, FL 33130 US

**FEI Number:** 86-2118055

**Certificate of Status Desired:** No

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

MELIAN GARCIA, DAYAMI  
937 SW 7 ST  
MIAMI, FL 33130 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 MELIAN GARCIA, DAYAMI  
Address 937 SW 7 ST  
City-State-Zip: MIAMI FL 33130

*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:** DAYAMI MELIAN GARCIA

MGR

02/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date