

2025 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:

5790 LAKESIDE DRIVE
APT 1018
MARGATE, FL 33063 US

FEI Number: 86-2118055

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MELIAN GARCIA, DAYAMI
5790 LAKESIDE DRIVE
APT 1018
MARGATE, FL 33063 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: DAYAMI MELIAN GARCIA

02/06/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MELIAN GARCIA, DAYAMI
Address 5790 LAKESIDE DRIVE
APT 1018
City-State-Zip: MARGATE FL 33063

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

OWNER

02/06/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date