

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060222

FILED
Mar 31, 2008
Secretary of State

Entity Name: TOTAL CARE HOME SERVICES, INC.

Current Principal Place of Business:

7220 NW 36TH ST SUITE 122
MIAMI, FL 33166

New Principal Place of Business:

7220 NW 36 ST
200/200
MIAMI, FL 33166

Current Mailing Address:

7220 NW 36TH ST SUITE 122
MIAMI, FL 33166

New Mailing Address:

7220 NW 36 ST
200/220
MIAMI, FL 33166

FEI Number: 14-1928018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: DE LA CRUZ, GUSTAVO
Address: 7220 NW 36TH ST SUITE 122
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: DE LA CRUZ, GUSTAVO
Address: 7220 NW 36 ST SUITE 200/220
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GUSTAVO DE LA CRUZ

PRES

03/31/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date