

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000124193

Entity Name: HOME WATCH CARE INC.

FILED
Jul 18, 2006
Secretary of State**Current Principal Place of Business:**4005 NW 114 AVENUE
4
DORAL, FL 33178**New Principal Place of Business:****Current Mailing Address:**4005 NW 114 AVENUE
4
DORAL, FL 33178**New Mailing Address:**

FEI Number: 20-3443369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SILVERA, SEBASTIAN N
4005 NW 114 AVENUE
4
DORAL, FL 33178 US**Name and Address of New Registered Agent:**PARRETT, JENNIFER A
4005 NW 114 AVENUE
4
DORAL, FL 33178 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: JENNIFER PARRETT

07/18/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: SILVERA, SEBASTIAN N
Address: 4005 NW 114 AVENUE SUITE 4
City-St-Zip: DORAL, FL 33178**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: PARRETT, JENNIFER A
Address: 4005 NW 114 AVENUE SUITE 4
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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: JENNIFER PARRETT

P

07/18/2006

Electronic Signature of Signing Officer or Director

Date