

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000075773

FILED
Apr 29, 2008
Secretary of State

Entity Name: 360 HOME CARE, INC.

Current Principal Place of Business:

801 MADRID AVE.
SUITE 211
CORAL GABLES, FL 33134 US

New Principal Place of Business:

801 MADRID AVE.
SUITE # 3
CORAL GABLES, FL 33134 US

Current Mailing Address:

801 MADRID AVE.
SUITE 211
CORAL GABLES, FL 33134 US

New Mailing Address:

801 MADRID AVE.
SUITE # 3
CORAL GABLES, FL 33134 US

FEI Number: 20-4994382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELINU, PIERO
801 MADRID AVE.
SUITE 211
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MELINU, PIERO
801 MADRID AVE.
SUITE # 3
CORAL GABLES, FL 33134 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:

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: MELINU, PIERO
Address: 2108 SW 60 AV
City-St-Zip: MIAMI, FL 33155 US

Title: DIR () Delete
Name: MELINU, DAISY
Address: 2108 SW 60 AV
City-St-Zip: MIAMI, FL 33155 US

Title: DIR () Delete
Name: REGALADO, GLORIA
Address: 4811 SW5 TERRACE
City-St-Zip: MIAMI, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PIERO MELINU

DIR

04/29/2008

Electronic Signature of Signing Officer or Director

Date