2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2011
Secretary of State

DOCUMENT# P06000120551

Entity Name: HARMONY CARE HOME "INC".

Current Principal Place of Business:

534 SE THANKSGIVING AVE
PORT SAINT LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

534 SE THANKSGIVING AVE
PORT SAINT LUCIE, FL 34984

New Mailing Address:

FEI Number: 20-5581896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SZABO, MAGDOLNA
534 SE THANKSGIVING AVE
PORT ST LUCIE, FL 34984 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

OFFICERS AND DIRECTORS:

Title: PS
Name: SZABO, MAGDOLNA
Address: 534 SE THANKSGIVING AVE
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: TVP
Name: SZABO, SANDOR
Address: 534 SE THANKSGIVING AVE
City-St-Zip: PORT SAINT LUCIE, FL 34984

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 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 all other like empowered.

SIGNATURE: MAGDOLNA SZABO PS 04/18/2011

Electronic Signature of Signing Officer or Director Date