

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000061525

FILED
Apr 30, 2012
Secretary of State

Entity Name: ACM HOME HEALTH, CORP.

Current Principal Place of Business:

900 WEST 49 ST
510
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

900 WEST 49 ST
510
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 26-0225705 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ABREU PINO, OMAR
7505 NW 169TH LANE
HIALEAH, FL 33015 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: PTD
Name: ABREU PINO, OMAR
Address: 900 WEST 49 ST
City-St-Zip: HIALEAH, FL 33012 US

Title: VS
Name: MONAGAS, PEDRO
Address: 14460 SW 110 ST
City-St-Zip: MIAMI, FL 33186 US

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: OMARABREU PINO

DON

04/30/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date