

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000079281

Entity Name: VERITAS HOME CARE, INC.

FILED  
Apr 21, 2011  
Secretary of State

**Current Principal Place of Business:**

3925 BOYNTON BEACH BLVD.,  
SUITE 103  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

**Current Mailing Address:**

3925 BOYNTON BEACH BLVD.,  
SUITE 103  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

FEI Number: 27-1000493

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CADIZ, EDUARDO T JR  
19427 NORTH COQUINA WAY  
WESTON, FL 33332 US

**Name and Address of New Registered Agent:**

CADIZ, EDUARDO T JR  
3925 BOYNTON BEACH BLVD.,  
SUITE 103  
BOYNTON BEACH, FL 33436 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: EDUARDO CADIZ

04/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: CADIZ, MARIA B  
Address: 19427 NORTH COQUINA WAY  
City-St-Zip: WESTON, FL 33332

Title: DIR  
Name: CADIZ, EDUARDO T JR  
Address: 19427 NORTH COQUINA WAY  
City-St-Zip: WESTON, FL 33332

Title: DIR  
Name: ARCEBIDO, ROLANDO  
Address: 547 CLERMONT CT  
City-St-Zip: WESTON, FL 33326

Title: DIR  
Name: ARCEBIDO, MARIA C  
Address: 547 CLERMONT CT  
City-St-Zip: WESTON, FL 33326

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: EDUARDO CADIZ

DIR

04/21/2011

Electronic Signature of Signing Officer or Director

Date