

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000026130

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** L & V NURSING SERVICE CORP

**Current Principal Place of Business:**

4721 NW 7 ST  
APT 210  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

4721 NW 7 ST  
APT 210  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

MACHADO CORDOVA, LISBET  
4721 NW 7 ST  
APT 210  
MIAMI, FL 33126 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: P  
Name: MACHADO CORDOVA, LISBET  
Address: 4721 NW 7 ST, APT 210  
City-St-Zip: MIAMI, FL 33126

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: LIZBET MACHADO

PRES

04/18/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date