

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000043590

FILED
Apr 19, 2006
Secretary of State

Entity Name: TENDER CARE SERVICES, INC.

Current Principal Place of Business:

7951 SW 6TH STREET
SUITE # 107
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

7951 SW 6TH STREET
SUITE # 107
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 65-0758564 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEICHER, ROBERT
10177 NW 1ST MANOR
CORAL SPRINGS, FL 333071 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GAINZA, GUYTELLE
Address: 16703 S.W. 5TH COURT
City-St-Zip: WESTON, FL 33326

Title: PRES () Delete
Name: TEICHER, ROBERT
Address: 10177 NW 1ST MANOR
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: GAINZA, GUYTELLE
Address: 16703 S.W. 5TH COURT
City-St-Zip: WESTON, FL 33326

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT TEICHER

PRES

04/19/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date