

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000043590

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: TENDER CARE SERVICES, INC.

**Current Principal Place of Business:**

1505 S. UNIVERSITY DRIVE  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

1505 S. UNIVERSITY DRIVE  
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: VP ( ) 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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

I hereby certify that the information supplied with this filing does not qualify 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

04/28/2008

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

\_\_\_\_\_ Date