

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S 95331 (2)**

1. Corporation Name

REVELATION HOME CARE, INC.

Principal Place of Business

Mailing Address

**215 S.W. 17TH AVENUE
SUITE 312
MIAMI FL 33135**

**52 S.W. 81TH AVENUE
MIAMI FL
33144 DADE**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc

26 State, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

3. Date Incorporated or Qualified

3a. Date of Last Report

11/20/1991

10/30/95

4. FEI Number

Applied For

65-0338 116

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 193.03?
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GONZALEZ EDELHIRA H.

81 Name

NOY ROBERT O.

82 Street Address (P.O. Box Number is Not Acceptable)

52 S.W. 81TH AVENUE

83

84 City

MIAMI

FL

85 Zip Code

33144

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(If the Registered Agent signature is required when registering)

(If the

12. OFFICERS AND DIRECTORS

TITLE

PS NOY ROBERT O.

☐ DELETE

NAME

NOY ROBERT O.

STREET ADDRESS

52 S.W. 81TH AVENUE

CITY-ST-ZIP

MIAMI FL 33144

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