

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000072810

FILED
Aug 20, 2007
Secretary of State

Entity Name: VICTORY HOME COMPANION CARE AGENCY, LLC

Current Principal Place of Business:

26 DIPLOMAT PKWY
HALLANDALE, FL 33009

New Principal Place of Business:

8855 COLLINS AVE
4H
SURFSIDE, FL 33154

Current Mailing Address:

26 DIPLOMAT PKWY
HALLANDALE, FL 33009

New Mailing Address:

8855 COLLINS AVE
4H
SURFSIDE, FL 33154

FEI Number: 20-5257617 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GLAZER, BRONYA
26 DIPLOMAT PKWY
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

GLAZER, BRONYA
26 DIPLOMAT PKWY
COMMERCIAL
HALLANDALE, FL 33009 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: BRONYA GLAZER

08/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: VAYNSHTEYN, VICTOR
Address: 26 DIPLOMAT PKWY
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: VAYNSHTEYN, VICTOR
Address: 8855 COLLINS AVE APT 4H
City-St-Zip: SURFSIDE, FL 33154

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: VICTOR VAYNSHTEYN

P

08/20/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date