

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000036972

**Entity Name:** MERCEDITAS HOME CARE INC.

**Current Principal Place of Business:**

2170 S.W. 20TH STREET  
MIAMI, FL 33145

**Current Mailing Address:**

2170 S.W. 20TH STREET  
MIAMI, FL 33145

**FEI Number:** 65-1015049

**Certificate of Status Desired:** No

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

COLL, GUADALUPE  
445 N.W. 24TH AVE.  
MIAMI, FL 33125 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PD  
Name COLL, GUADALUPE  
Address 445 N.W. 24TH AVE.  
City-State-Zip: MIAMI FL 33125

*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:** GUADALUPE COLL

**PRES**

**01/27/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date