

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006116

Entity Name: CAPRI HOME CARE, INC.

Current Principal Place of Business:

3023 EASTLAND BLVD
SUITE 103
CLEARWATER, FL 33761

Current Mailing Address:

3023 EASTLAND BLVD
SUITE 103
CLEARWATER, FL 33761

FEI Number: 55-0815642

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DECAMELLA, DAVID J
3023 EASTLAND BLVD
SUITE 103
CLEARWATER, FL 33761 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 D
Name DECAMELLA, DAVID
Address 1211 PLAYMOOR DRIVE
City-State-Zip: PALM HARBOR FL 34683

Title D
Name DECAMELLA, GENA
Address 1211 PLAYMOOR DRIVE
City-State-Zip: PALM HARBOR FL 34683

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: DAVID DECAMELLA

ADM

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date