

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000091465

**Entity Name:** PREFERRED HOME HEALTH AGENCY INC.

**Current Principal Place of Business:**

13831 SW 59TH ST  
SUITE# 105  
MIAMI, FL 33183

**Current Mailing Address:**

13831 SW 59TH ST  
SUITE # 105  
MIAMI, FL 33183

**FEI Number:** 20-1243280

**Certificate of Status Desired:** No

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

CARDOSO, YOANNER R  
13831 SW 59TH ST  
SUITE # 105  
MIAMI, FL 33183 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 P  
Name CARDOSO, YOANNER R  
Address 13831 SW 59 TH ST SUITE # 105  
City-State-Zip: MIAMI FL 33183

*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:** CARDOSO YOANNER R

P

04/08/2015

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

\_\_\_\_\_  
Date