# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120138

Entity Name: MD HOME CARE, INC.

#### **Current Principal Place of Business:**

4857 N.W. 168TH TERRACE CAROL CITY, FL 33055

# **Current Mailing Address:**

4857 N.W. 168TH TERRACE CAROL CITY, FL 33055 US

### FEI Number: 20-1513920

# Name and Address of Current Registered Agent:

CANCELA, MADELEIN 4857 N.W. 168TH TERRACE CAROL CITY, FL 33055 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

# Officer/Director Detail :

Title	PD
Name	CANCELA, MADELEIN
Address	4857 N.W. 168TH TERRACE
City-State-Zip:	COOPER CITY FL 33055

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: MADELEIN CANCELA

PRESIDENT

04/24/2017 Date

Electronic Signature of Signing Officer/Director Detail

FILED Apr 24, 2017 Secretary of State CC2616434020

Certificate of Status Desired: No

Date