

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000049357

**Entity Name:** MILLIE HOME CARE CORP.

**Current Principal Place of Business:**

17810 SW 137 CT  
MIAMI, FL 33177

**FILED**  
**Mar 11, 2016**  
**Secretary of State**  
**CC1565627719**

**Current Mailing Address:**

17810 SW 137 CT  
MIAMI, FL 33177 US

**FEI Number:** 20-2645117

**Certificate of Status Desired:** No

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

SOSA, JORGE  
17810 SW 137 CT.  
MIAMI, FL 33177 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	Title	VP
Name	SOSA, JORGE	Name	POLO, MAIYEN
Address	17810 SW 137 CT	Address	17810 SW 137 CT
City-State-Zip:	MIAMI FL 33177	City-State-Zip:	MIAMI FL 33177

*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:** SOSA JORGE

**PRESIDENT**

**03/11/2016**

Electronic Signature of Signing Officer/Director Detail

Date