

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000091006

Entity Name: BLUE VISTA HOME HEALTH INC.

Current Principal Place of Business:

3600 S STATE RD 7 #310
MIRAMAR, FL 33023

Current Mailing Address:

3600 S STATE RD 7 #310
MIRAMAR, FL 33023

FEI Number: 36-4616797

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FL 33411 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 DP
Name OSAGIE, CHRIS
Address 13914 BLUE VISTA DR
City-State-Zip: SUGAR LAND TX 77498

Title DVT
Name OSAGIE, ROSEBETH
Address 13914 BLUE VISTA DR
City-State-Zip: SUGAR LAND TX 77498

Title S
Name OSAGIE, OFOSA
Address 13914 BLUE VISTA DR
City-State-Zip: SUGAR LAND TX 77498

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: CHRIS OSAGIE

DP

01/22/2013

Electronic Signature of Signing Officer/Director Detail

Date