

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000038953

Entity Name: AMERICAN HOME HEALTH PROVIDERS, CORP.

Current Principal Place of Business:

6001 NW 153 STREET
SUITE 155
MIAMI LAKES, FL 33014

Current Mailing Address:

6001 NW 153 STREET
SUITE 155
MIAMI LAKES, FL 33014

FEI Number: 20-8735577

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALONSO SANTANA, RUBEN
6001 NW 153RD STREET
STE 155
MIAMI LAKES, FL 33014-2447 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 DPS
Name SANTANA, RUBEN ALONSO
Address 6001 NW 153 ST., STE 155
City-State-Zip: MIAMI LAKES FL 33014

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: RUBEN ALONSO SANTANA

PRESIDENT

02/28/2017

Electronic Signature of Signing Officer/Director Detail

Date