

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000058098

Entity Name: HOME HEALTHCARE MANAGEMENT RESOURCES, INC.

Current Principal Place of Business:

36 ISLAND AVE
51
MIAMI BEACH, FL 33139

Current Mailing Address:

PO BOX 191777
MIAMI BEACH, FL 33119

FEI Number: 26-2804392

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHULER, ROB
36 ISLAND AVE
51
MIAMI BEACH, FL 33139 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 MANAGING DIRECTOR
Name SCHULER, ROB
Address 36 ISLAND AVE 51
City-State-Zip: MIAMI BEACH FL 33139

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: ROBERT K SCHULER

PCEO

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date