2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2014
Secretary of State
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Entity Name: RELIABLE HEALTHCARE AGENCY, INC.

Current Principal Place of Business:

5269 S FLORIDA AVE
LAKELAND, FL 33813

Current Mailing Address:

5269 S FLORIDA AVE
LAKELAND, FL 33813

FEI Number: 27-2438773

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEHTERSOLE, EUSTACE GV.P.
456 OAKLANDING BLVD
MULBERRY, FL 33860 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	D	Title	D
Name	NETHERSOLE, ELAINE	Name	NETHERSOLE, DENISE
Address	459 HILLSIDE AVE	Address	456 OAKLANDING BLVD
City-State-Zip:	PISCATAWAY NJ 08854	City-State-Zip:	MULBERRY FL 33860

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: NETHERSOLE ELAINE DIRECTOR 03/20/2014

Electronic Signature of Signing Officer/Director Detail — Date