

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000005601

Entity Name: SERVIVITA NURSE CARE , CORP.

Current Principal Place of Business:

9020 SW 40 TERRACE
MIAMI, FL 33165

Current Mailing Address:

9020 SW 40 TERRACE
MIAMI, FL 33165 US

FEI Number: 27-4585267

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BORGES, LAZARO O
9020 SW 40 TERRACE
MIAMI, FL 33165 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 P
Name BORGES, LAZARO O
Address 9020 SW 40 TERRACE
City-State-Zip: MIAMI FL 33165

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: LAZARO O BORGES

PRESIDENT

04/05/2014

Electronic Signature of Signing Officer/Director Detail

Date