

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000030204

Entity Name: ALLAN HOME HEALTH CARE, INC.

Current Principal Place of Business:

7439 WEST 22 AVENUE
105
HIALEAH, FL 33016

Current Mailing Address:

7439 WEST 22 AVENUE
105
HIALEAH, FL 33016 US

FEI Number: 45-4918897

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUADA, GIDE
7439 WEST 22 AVENUE
105
HIALEAH, FL 33016 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 GUADA, GIDE
Address 7439 WEST 22 AVENUE 105
City-State-Zip: HIALEAH FL 33016

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: GUADA,GIDE

P

01/15/2016

Electronic Signature of Signing Officer/Director Detail

Date