

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000046734

Entity Name: ALBORADA HOME HEALTH OF TAMPA, INC.

Current Principal Place of Business:

8270 WOODLAND CENTER BLVD STE 127
TAMPA, FL 33614

Current Mailing Address:

8270 WOODLAND CENTER BLVD STE 127
TAMPA, FL 33614

FEI Number: 45-5320017

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, IVONNE
8270 WOODLAND CENTER BLVD STE 127
TAMPA, FL 33614 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 MARTINEZ, IVONNE
Address 8270 WOODLAND CENTER BLVD STE
127
City-State-Zip: TAMPA FL 33614

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: IVONNE MARTINEZ

PRESIDENT

04/21/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date