

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000077446

**FILED
Mar 18, 2014
Secretary of State
CC9522359093**

Entity Name: HOME HEALTH CARE OF THE PALM BEACHES CORP

Current Principal Place of Business:

4460 CARVER ST.
SUITE 2
LAKE WORTH, FL 33461

Current Mailing Address:

4460 CARVER ST.
SUITE 2
LAKE WORTH, FL 33461

FEI Number: 46-3724846

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STANFIELD, PETER
7340 SW 48 ST
SUITE 107
MIAMI, FL 33155 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 PRES
Name MIJARES, RICARDO
Address 4460 CARVER ST. SUITE 2
City-State-Zip: LAKE WORTH FL 33461

Title VP
Name MIJARES, CARLOS
Address 4460 CARVER ST. SUITE 2
City-State-Zip: LAKE WORTH FL 33461

Title TR
Name PEREZ, JESUS
Address 4460 CARVER ST. SUITE 2
City-State-Zip: LAKE WORTH FL 33461

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: RICARDO MIJARES

PRESIDENT

03/18/2014

Electronic Signature of Signing Officer/Director Detail

Date