

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000063102

**FILED  
Feb 08, 2016  
Secretary of State  
CC6254637024**

**Entity Name:** BLUE MOON HOMECARE INTERNATIONAL, INC

**Current Principal Place of Business:**

315 MALVERNE ROAD  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

315 MALVERNE ROAD  
WEST PALM BEACH, FL 33405

**FEI Number: 47-1472652**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HERNADEZ, WILLIAM G  
315 MALVERNE ROAD  
WEST PALM BEACH, FL 33405 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 HERNANDEZ, WILLIAM G  
Address 315 MALVERNE ROAD  
City-State-Zip: WEST PALM BEACH FL 33405

Title VP  
Name ORTIZ, RUTILA G  
Address 315 MALVERNE ROAD  
City-State-Zip: WEST PALM BEACH FL 33405

Title T  
Name HERNANDEZ, RONALDO  
Address 315 MALVERNE ROAD  
City-State-Zip: JUPITER FL 33405

*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: WILLIAM G HERNANDEZ**

**PRESIDENT**

**02/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date