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.

Electronic Signature of Signing Officer/Director Detail

DON

03/10/2016

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000070902

Entity Name: 1ST NURSING CARE OF HOMEHEALTH SERVICES INC

Current Principal Place of Business:

1634 SE 47TH ST UNIT 11 CAPE CORAL, FL 33904

Current Mailing Address:

1634 SE 47TH ST UNIT 11 CAPE CORAL, FL 33904

FEI Number: 47-4916310

Name and Address of Current Registered Agent:

ELDA MARIA TUBELLA CARBAJAL 1634 SE 47TH ST UNIT 11 CAPE CORAL, FL 33904 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

Officer/Director Detail :

Title	Р	Title	VP
Name	ELDA MARIA TUBELLA CARBAJAL	Name	YENDRY RODRIGUEZ JO
Address	1634 SE 47TH ST UNIT 11	Address	1634 SE 47TH ST UNIT 11
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33904

Name	YENDRY RODRIGUEZ JO
Address	1634 SE 47TH ST UNIT 11
City-State-Zip:	CAPE CORAL FL 33904

Certificate of Status Desired: No

FILED Mar 10, 2016 Secretary of State CC4828310163

Date

Date