

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000034766

Entity Name: QUALITY CARE NURSING SERVICES, INC.

Current Principal Place of Business:

1111 PARK CENTER BLVD.
#201
MIAMI GARDENS I, FL 33169

Current Mailing Address:

1111 PARK CENTER BLVD.
#201
MIAMI GARDENS, FL 33169

FEI Number: 65-0416371

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANKLIN, CARMEN
1343 NW 133RD AVE
PEMBROKE PINES, FL 33028 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 D
Name FRANKLIN, CARMEN
Address 1343 NW 133RD AVENUE
City-State-Zip: PEMBROKE PINES FL 33028

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: CARMEN FRANKLIN

PRESIDENT

06/26/2014

Electronic Signature of Signing Officer/Director Detail

Date