

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000086101

**Entity Name:** HOME NURSE CORP.

**Current Principal Place of Business:**

10850 S.W. 113TH PL.  
MIAMI, FL 33176

**Current Mailing Address:**

10850 S.W. 113TH PL.  
MIAMI, FL 33176

**FEI Number:** 65-0701539

**Certificate of Status Desired:** Yes

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

ROIZ, OSCAR L  
10850 S.W. 113TH PL.  
MIAMI, FL 33176 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	Title	S
Name	SHAHAM, JACOB	Name	SHAHAM, HELEN
Address	10850 S.W. 113TH PL.	Address	10850 S.W. 113TH PL.
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176

*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:** JACOB SHAHAM

**PRESIDENT**

**04/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date