

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000005937

**Entity Name:** HANA CARE, INC.

**Current Principal Place of Business:**

1771 ADGEWOOD AVE WEST  
6B  
JACKSONVILLE, FL 32208

**Current Mailing Address:**

1771 ADGEWOOD AVE WEST  
6B  
JACKSONVILLE, FL 32208 US

**FEI Number:** 59-3560191

**Certificate of Status Desired:** No

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

BATAINEH, MOHAMMAD R  
1200 RIVERPLACE BOULEVARD  
SUITE 705  
JACKSONVILLE, FL 32207 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:** MOHAMMAD BATAINEH

04/03/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name           MOUSTAFA, HANAN  
Address        4074 ALESBURY DR.  
City-State-Zip: JACKSONVILLE FL 32224

*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:** HANAN MOUSTAFA

PRESIDENT

04/03/2014

Electronic Signature of Signing Officer/Director Detail

Date