2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 11, 2007
Secretary of State

DOCUMENT# F03000002738

Entity Name: ALL METRO HOME CARE SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

50 BROADWAY
LYNBROOK, NY 11563

New Principal Place of Business:

Current Mailing Address:

50 BROADWAY
LYNBROOK, NY 11563

New Mailing Address:

FEI Number: 43-2015287 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: CT CORPORATION SYSTEM
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete
Name: MIXER, SCOTT R
Address: 50 BROADWAY
City-St-Zip: LYNBROOK, NY 11563

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: SHAPIRO, SETH J
Address: 50 BROADWAY
City-St-Zip: LYNBROOK, NY 11563

Title: EVP ( ) Change (X) Addition
Name: WATSON, JAMES T
Address: 50 BROADWAY
City-St-Zip: LYNBROOK, NY 11563

Title: PRES ( ) Change (X) Addition
Name: MIDDLETON, DAVE P
Address: 50 BROADWAY
City-St-Zip: LYNBROOK, NY 11563

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SETH J. SHAPIRO VP 10/11/2007
Electronic Signature of Signing Officer or Director Date