## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFÍT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G10322

(7)

REGENCY HOME HEALTH SERVICES, INC.

Principa! Place of Business Mailing Address % ABRAHAM A. GALBUT, ESO. % abraham A. Galbut, ESQ. 999 WASHINGTON AVENUE 999 WASHINGTON AVENUE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139-5015 3. Date Incorporated or Qualified 3a. Date of Last Report 10/28/1982 04/25/1996 Applied For 2. Principal Place of Business 2a, Mailing Address 4. FÉI Number 59-2232667 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio Country  $Z \oplus$ 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name GALBUT, ABRAHAM A., ESQ. 999 WASHINGTON AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33139 83 City 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed mane of registered agent and the if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. CR2E034 (9/96) 13. PS1 DELETE Change Addition TITLE 1.1 TITLE GALBUT, RUSSELL W. NAME 12 NAME 999 WASHINGTON AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE Change Addition 2.1 TITLE GALBUT, RUSSELL W. 2.2 NAME NAME 999 WASHINGTON AVENUE STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 2.4 CITY-ST-ZIF DELETE Addition .... Change TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY - ST - ZIP DELETE Change \_\_\_ Addition 4.1 TITLE THIE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 52 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

information indicated on this annual report or supplemental annual report is true and accurate and that my 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 instee inspected by execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block

1-2-97

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FILED

Jan 17 1997 8:00am

Secretary of State