

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K59740

FILED
Jul 15, 2004
Secretary of State

Entity Name: UNIVERSAL HOME RESPI CARE, INC.

Current Principal Place of Business:

1911 S.W. 101 AVE
MIRMAR, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 260547
PEMBROKE PINES, FL 33026 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, MICHAEL
11020 N.W. 15 STREET
PEMBROKE PINES, FL 33026

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GREENE, MICHAEL,
Address: 11020 N.W. 15 STREET
City-St-Zip: PEMBROKE PINES, FL

Title: TS () Delete
Name: GREENE, MARTIN GLORI, A
Address: 11020 N.W. 15 STREET
City-St-Zip: PEMBROKE PINES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GREENE, MICHAEL,
Address: 11020 N.W. 15 STREET
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: TS (X) Change () Addition
Name: GREENE, MARTIN GLORI, A
Address: 11020 N.W. 15 STREET
City-St-Zip: PEMBROKE PINES, FL 33026 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL B. GREENE

DP

07/15/2004

Electronic Signature of Signing Officer or Director

Date