2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012339

Name:

Entity Name: ELITE HOME HEALTH OF THE PALM BEACHES, L.L.C.

FILED Jan 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1700 N. DIXIE HWY 1700 NORTH DIXIE HWY SUITE 127 127

BOCA RATON, FL 33432 BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

1776 NORTH PINE ISLAND ROAD 1776 N. PINE ISLAND RD.

SUITE 101

PLANTATION, FL 33322 PLANTATION, FL 33322

FEI Number: 41-2067750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KAPLAN, GARY KAPLAN, VIVIAN 1776 N PINE ISLAND RD. 1776 NORTH PINE ISLAND ROAD SUITE 101 SUITE 101

PLANTATION, FL 33322 US PLANTATION, FL 33322 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: VIVIAN KAPLAN 01/06/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete MGRM Title: (X) Change () Addition

KAPLAN, VIVIAN KAPLAN, VIVIAN Address: 1776 N PINE ISLAND RD #101 Address: 1776 NORTH PINE ISLAND ROAD SUITE 101

Name:

City-St-Zip: PLANTATION, FL 33322 City-St-Zip: PLANTATION, FL 33322

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: VIVIAN KAPLAN **MGRM** 01/06/2006