2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007125

Entity Name: ALL TOTAL CARE, L.L.C.

FILED Jan 05, 2006 Secretary of State

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

1414 SOUTH POWERLINE ROAD 5215 COCONUT CREEK PARKWAY POMPANO BEACH, FL 33069

MARGATE, FL 33063

Current Mailing Address: New Mailing Address:

1414 SOUTH POWERLINE ROAD 5215 COCONUT CREEK PARKWAY

POMPANO BEACH, FL 330T9 MARGATE, FL 33063

FEI Number: 72-1554295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NORDT, GREGORY M RAKOFF, CAROL

100 WEST CYPRESS CREEK ROAD, SUITE 700 5215 COCONUT CREEK PARKWAY

FORT LAUDERDALE, FL 33309 US MARGATE, FL 33063 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: CAROL RAKOFF 01/05/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete

(X) Change () Addition RAKOFF, CAROL RAKOFF, CAROL Name: Name:

1414 SOUTH POWERLINE ROAD Address: 5215 COCONUT CREEK PARKWAY Address:

City-St-Zip: POMPANO BEACH, FL 330T9 City-St-Zip: MARGATE, FL 33063

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

RAKOFF, LESLIE Name: RAKOFF-ADAMS, LESLIE Name: Address: 1414 SOUTH POWERLINE ROAD Address: 5215 COCONUT CREEK PARKWAY

City-St-Zip: POMPANO BEACH, FL 330T9 City-St-Zip: MARGATE, FL 33063

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

RAKOFF, DAVID Name: RAKOFF, DAVID Name:

14145 S POWERLINE RD. 5215 COCONUT CREEK PARKWAY Address: Address:

City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. 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: CAROL RAKOFF 01/05/2006