

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000025175

FILED
Apr 26, 2006
Secretary of State

Entity Name: GENTLE CARE HOME HEALTH, L.L.C.

Current Principal Place of Business:

2506 PALM AVENUE, SUITE B
HIALEAH, FL 33010

New Principal Place of Business:

2506 PALM AVENUE
SUITE B
HIALEAH, FL 33010

Current Mailing Address:

2506 PALM AVENUE, SUITE B
HIALEAH, FL 33010

New Mailing Address:

2506 PALM AVENUE
SUITE B
HIALEAH, FL 33010

FEI Number: 20-0095601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, JOSE D
2506 PALM AVENUE, SUITE B
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

ACOSTA, JOSE D
2506 PALM AVENUE
SUITE B
HIALEAH, FL 33010 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: JOSE D. ACOSTA

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ACOSTA, JOSE D
Address: 2506 PALM AVENUE, SUITE B
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSE D. ACOSTA

MGRM

04/26/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date