2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2010
Secretary of State

DOCUMENT# L05000036393

Entity Name: NURSESRX HOME HEALTH, LLC

Current Principal Place of Business:

6490 WEST 20TH AVE.
HIALEAH, FL 33016 US

New Principal Place of Business:

5851 HOLATEE TRAIL
SOUTHWEST RANCHES, FL 33330 US

Current Mailing Address:

5851 HOLATEE TRAIL
SOUTHWEST RANCHES, FL 33330 US

New Mailing Address:

FEI Number: 20-3269640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FIGUEROA, LUIS R
5851 HOLATEE TRAIL
SOUTHWEST RANCHES, FL 33330 US

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: FIGUEROA, LUIS R
Address: 5851 HOLATEE TRAIL
City-St-Zip: SOUTHWEST RANCHES, FL 33330 US

Title: MGRM
Name: FIGUEROA, DENISE T
Address: 5851 HOLATEE TRAIL
City-St-Zip: SOUTHWEST RANCHES, FL 33330 US

Title: MGRM
Name: STRADER, LEE A
Address: 5851 HOLATEE TRAIL
City-St-Zip: SOUTHWEST RANCHES, FL 33330 US

Title: MGRM
Name: ARTAMENDI, HAYDEE L
Address: 5851 HOLATEE TRAIL
City-St-Zip: SOUTHWEST RANCHES, FL 33330 US

I hereby 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 Statues.

SIGNATURE: LUIS R. FIGUEROA MGRM 02/16/2010

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