

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089235

FILED
Feb 20, 2009
Secretary of State

Entity Name: RAINBOW HOME HEALTH SERVICES LLC.

Current Principal Place of Business:

15165 N.W 77 AVE
2013
MIAMI LAKES, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

15165 N.W 77 AVE
2013
MIAMI LAKES, FL 33014 US

New Mailing Address:

FEI Number: 13-4308143 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AULET, BELKIS
1385 WEST 78 TERRACE
HIALEAH, FL 33014 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: MGR () Delete
Name: AULET, BELKIS
Address: 1385 WEST 78 TERR
City-St-Zip: HIALEAH, FL 33014

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 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: BELKIS AULET

MNGR

02/20/2009

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