

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000032853

FILED
Feb 11, 2009
Secretary of State

Entity Name: MEDI-PRO HOME-CARE SERVICES, LLC

Current Principal Place of Business:

7330 WEST 20TH AVENUE
MIAMI LAKES, FL 33016

New Principal Place of Business:

6843 MAIN STREET
302
MIAMI LAKES, FL 33014

Current Mailing Address:

7330 WEST 20TH AVENUE
MIAMI LAKES, FL 33016

New Mailing Address:

6843 MAIN STREET
302
MIAMI LAKES, FL 33014

FEI Number: 20-5166121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COSTA, HELEN C ESQ.
7330 WEST 20TH AVENUE
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

COSTA, HELEN C ESQ.
6843 MAIN STREET
302
MIAMI LAKES, FL 33014 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:

02/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COSTA, HELEN C
Address: 7330 WEST 20TH AVENUE
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COSTA, HELEN C
Address: 6843 MAIN STREET, #302
City-St-Zip: MIAMI LAKES, FL 33014

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: HELEN C COSTA

MNGR

02/11/2009

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