

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000010591

FILED
Jan 17, 2008
Secretary of State

Entity Name: UNITED CARE HOME HEALTH SERVICES LLC

Current Principal Place of Business:

12555 ORANGE DR. SUITE 272
DAVIE, FL 33330

New Principal Place of Business:

Current Mailing Address:

12555 ORANGE DR. SUITE 272
DAVIE, FL 33330

New Mailing Address:

FEI Number: 20-8373759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALOMA, DOMINIC
12555 ORANGE DR. SUITE 272
DAVIE, 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: MGR () Delete
Name: ALOMA, DOMINIC
Address: 13163 SW 16TH ST.
City-St-Zip: DAVIE, FL 33325

Title: MGR () Delete
Name: NADUPARAMBIL, SANJAIMON
Address: 4022 TURQUOISE TR.
City-St-Zip: WESTON, FL 33331

Title: S () Delete
Name: NADUPARAMBIL, JESSE
Address: 4022 TURQUOISE TR.
City-St-Zip: WESTON, FL 33331

Title: T () Delete
Name: ALOMA, DENISE
Address: 13163 SW 16TH ST.
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES:

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

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

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

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: DENISE ALOMA

T

01/17/2008

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