

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042183

FILED
Jun 25, 2009
Secretary of State

Entity Name: VISION HOME HEALTH LLC

Current Principal Place of Business:

5979 NW 151 STREET
SUITE 234
MIAMI, FL 33014

New Principal Place of Business:

New Mailing Address:

5979 NW 151 STREET
SUITE 234
MIAMI, FL 33014

Current Mailing Address:

8831 NW 194TH TERRACE
MIAMI, FL 33018

FEI Number: 26-2556528 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LEE, MICHAEL PRESID
8831 NW 194TH TERRACE
MIAMI, FL 33018 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HHCM SERVICES INC.
Address: 2332 GALLINDO STREET SUITE 250
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEE, MICHAEL
Address: 5979 NW 151 STREET
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: MICHAEL LEE

PRES

06/25/2009

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