2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2010
Secretary of State

DOCUMENT# L09000072677

Entity Name: ALPHA HOME HEALTH SOLUTIONS LLC

Current Principal Place of Business:

8615 COMMODITY CIRCLE
SUITE #4
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

8615 COMMODITY CIRCLE
#4
ORLANDO, FL 32819 US

New Mailing Address:

8615 COMMODITY CIRCLE
SUITE #4
ORLANDO, FL 32819 US

FEI Number: 27-0674177 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

CASTELINO, JOY
8615 COMMODITY CIRCLE,
SUITE #4
ORLANDO, FL 32819 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
Name: TAURO, JENNIFER
Address: 8615 COMMODITY CIRCLE, SUITE #4
City-St-Zip: ORLANDO, FL 32819 US

Title: MGR
Name: ZANTUA, REMEDIOS
Address: 8615 COMMODITY CIRCLE, SUITE #4
City-St-Zip: ORLANDO, FL 32819 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: JENNIFER TAURO MGR 05/02/2010

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