2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

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Entity Name: ALL CARE SOLUTIONS, LLC

Current Principal Place of Business:

17719 SW 144TH AVE
MIAMI, FL, 33177

New Principal Place of Business:

17719 SW 144TH AVE
MIAMI,, FL 33177

Current Mailing Address:

17719 SW 144TH AVE
MIAMI, FL, 33177

New Mailing Address:

17719 SW 144TH AVE
MIAMI,, FL 33177

FEI Number: 90-0672482 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RONDON-LASSEN, LUISA MRS.
17719 SW 144TH AVE
MIAMI, FL 33177 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: RONDON-LASSEN, LUISA MRS.
Address: 17719 SW 144TH AVE
City-St-Zip: MIAMI, FL 33177

Title: MGR
Name: FANDINO, MECEDES MRS.
Address: 17719 SW 144TH AVE
City-St-Zip: MIAMI, FL 33177

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: LUISA RONDON-LASSEN MGR 04/27/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date