FIL	E NOW: FILING FEE	AFTER MAY 1	IS \$225	.00					
PROFIT FLORIDA DEPARTMENT OF STATE									
	JAL REPORT		B. Mortham tary of State						
	19965/-9()		CORPORATI	pagal,					
DOCUMENT # L15330 (8)									
	M MANOR RETIREMENT HO	OME INC.							
					l				
Principal Place	of Business	Mailing Address				1 1031;(fil 00) (1301 (1100 (1100 (110)		IAN BIBN BIBN SIBN BIBN IBN	
% EMMINS HENRY 2771 NW 58TH TERR. LAUDERHILL FL 33313		% EMMINS HENRY 2771 NW 58TH TERR. LAUDERHILL FL 33313		-	Date Incorporated or Qualif	ed 3a Da	ate of Last Report		
9 Principal Pl	ago of Punicopa	T.S. Halles				09/08/1989		3/13/1995	
Principal Place of Business     The Principal Place of Business		2a. Mailing Address 26				4. FEI Number 59-2985597		Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	18	\$8.75 Additional Fee Required		
City & State	9	City & State				Election Campaign Financin     Trust Fund Contribution	g $\square$	<b>\$5.00</b> May Be	
Zip 24	Country 25	Zip	Country 30			8. This corporation has liability	for intangible	Added to Fees tax under s 199.032,	
	9. Name and Address of Current			······································	1	Florida Statutes  O. Name and Address of Ne	Yes No w Registered	i Agent	
HENDY	EMMING		81						
HENRY, EMMINS 2771 NW 58TH TERR.			82	Street /	Address (P.O. Box Number is Not Acceptable)				
LAUDER	HILL FL 33313		83					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
•			B4	City		-	FI	85 Zip Code	
11. Pursuant t	o the provisions of Sections 607.0502 a ed agent, or both, in the State of Florida th, and account the obligations of Section	nd 607.1508, Florida Statute Such change was authorize	es, the above-	named co	orporation	submits this statement for the	purpose of cl	nanging its registered office	
	h, and accept the obligations of, Section	n 607.0505, Florida Statutes.		2010(10)113	Dodra of	спессою. Глегеру ассерт гле	арропипени а	s registered agent, i am	
SIGNATURE _	Signature, typed or printed harne of registered agont an		Tc.: Registered Agu	nt signature re	equired whe		DA <sup>1</sup> E		
TITLE	OFFICERS AND DIRECTORS  Delete		13. 1.1 TITLE		····	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
NAME	HENRY, EMMINS		1.2 NAME						
STREET ADDRESS CITY-ST-ZIP	2771 N.W. 58TH TERR. LAUDERHILL FL		1.3 STREET ADDRESS 1.4 C/TY - ST - ZIP						
TITLE	V	☐ DELETE	2 1 TITLE	51.21				Change Addition	
NAME STREET ADDRESS	WILSON, GWEN 4026 INVERRARY BLVD., 31403	•	2.2 NAME		00	marka a sa a sa ana ana ana ana ana ana ana			
CITY-ST-ZIP	LAUDERDALE FL		2 3 STREET 2 4 CITY - S	ł	50	71 NW 95th 17156 FL, 3	1277ac	e # 706	
TITLE	S UCMBY LIGA	☐ DELETE	3. 1 TITLE		<u> </u>	7.7.50		☐ Change ☐ Addition	
NAME STREET ADDRESS	HENRY, LISA 10356 ORMOND ST.		3.2 NAME 3.3 STREE	T ADDRESS					
CITY-ST-ZIP	SUNLAND CA 91040			3.4 CITY-ST-ZIP					
TITLE NAME	DELETE		4.1 TITLE	4.1 TITLE 4.2 NAME				Change Addition	
STREET ADDRESS			4.2 NAME	ADDRESS					
CITY-ST-ZIP TITLE		Elegen	4.4 CITY - S	1-ZIP			<del></del>		
NAME		DELETE	5 1 TITLE 5.2 NAME					Change   Addition	
STREET ADDRESS			5.3 STREET	ADORESS					
CITY-ST-ZIP TITLE		[ ] DELETE	5.4 CHY-S	T-ZIP					
NAME			€ 1 TITLE €.2 NAME	}	Li Change		Change		
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP 14. I do hereby	r certify that the information supplied with	h this filing is voluntarily furnis	6.4 CITY-S shed and does	not oval	ify for the	exemption stated in Section 1	19.07/3/04 - 50	orida Statutos I fiusibas	
oath; that I	am an officer or director of the corporat	ion or the receiver or trustee	iai report is tru Lemmowered t						
арроага пт	O 1	4 1	iss.			,			
SIGNATURE: COMMON DE DESIGNATURE AND TYPED ON PRINTED NAME OF SIGNATURE AND TYPED ON TYPED ON TYPED NAME OF SIGNATURE AND TYPED ON TYPED O									