## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L79831

Entity Name: DEBORAH'S NURSING SERVICES, INC.

FILED Apr 13, 2004 Secretary of State

| Current Principal Place of Business:  | New Principal Place of Business:  |    |
|---|---|----|
| 218 E COMMERCIAL BLVD<br>208-E  |   |    |
| LAUDERDALE BY THE SEA, FL 33308 US  |   |    |
| Current Mailing Address:  | New Mailing Address:  |    |
| 218 E COMMERCIAL BLVD   |   |    |
| 208-E<br>LAUDERDALE BY THE SEA, FL 33308 US   |   |    |
| FEI Number: 65-0199554 FEI Number Applied For ( )                                   | FEI Number Not Applicable ( ) Certificate of Status Desired ( )                                       |    |
| Name and Address of Current Registered Agent:                                       | Name and Address of New Registered Agent:   |    |
| LUBER, DEBORAH<br>218 E COMMERICAL BLVD<br>LAUDERDALE BY THE SEA, FL 33308          | LUBER, DEBORAH<br>218 E COMMERICAL BLVD<br>208-E  |    |
| The above named entity submits this statement for the purp in the State of Florida. | LAUDERDALE BY THE SEA, FL 33308  pose of changing its registered office or registered agent, or both, |    |
| SIGNATURE: DEBORAH LUBER  | 04/13/2004  |    |
| Electronic Signature of Registered Agent  | Date  |    |
| Election Campaign Financing Trust Fund Contribution ( ).                            |   |    |
| OFFICERS AND DIRECTORS:   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  | S: |
| Title: D ( ) Delete Name: LUBER, DEBORAH,   | Title: ( ) Change ( ) Addition Name:  |    |

 Title:
 D
 ( ) Delete
 Title:
 ( ) Change ( ) Addition

 Name:
 LUBER, DEBORAH,
 Name:

 Address:
 218 E COMMERCIAL BLVD
 Address:

 City-St-Zip:
 LAUDERDALE BY THE SEA, FL 33308
 City-St-Zip:

Title: T ( ) Delete Title: ( ) Change ( ) Addition Name: SHAPIRO. SANFORD Name:

 Name:
 SHAPIRO, SANFORD
 Name:

 Address:
 1491 SW 18TH AVE
 Address:

 City-St-Zip:
 FT LAUDERDALE, FL 33312
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH LUBER D 04/13/2004