

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006251

FILED  
Apr 23, 2012  
Secretary of State

Entity Name: A MOTHER'S CARE, INC.

**Current Principal Place of Business:**

5861 NW 17TH AVE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

5861 NW 17TH AVE  
MIAMI, FL 33142

**New Mailing Address:**

FEI Number: 65-0957363

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

STEVENS, KENNETH  
20600 NW 2 COURT  
MIAMI, FL 33169 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: FORD, EDDIE  
Address: 2984 NW 199 TERRACE  
City-St-Zip: MIAMI, FL 33056

Title: DT  
Name: STEVENS, KENNETH  
Address: 20600 NW 2 COURT  
City-St-Zip: MIAMI, FL 33169

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KENNETH STEVENS

DT

04/23/2012

Electronic Signature of Signing Officer or Director

Date