## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000092369

Entity Name: NEAT CARE, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15970 W STATE ROAD 84 1576 ZENITH WAY SUITE 250 WESTON, FL 33327

WESTON, FL 33326

Current Mailing Address: New Mailing Address:

15970 W STATE ROAD 84 1576 ZENITH WAY SUITE 250 WESTON, FL 33327 WESTON, FL 33326

FEI Number: 65-1080576 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:

ZAMBRANO, ULISES
15970 W. STATE RD. 84
SUITE 250
WESTON, FL 33326 US

ZAMBRANO, ULISES
1576 ZENITH WAY
WESTON, FL 33327 US

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: ULISES ZAMBRANO 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

 Name:
 ZAMBRANO, ULISES
 Name:
 ZAMBRANO, ULISES

 Address:
 165 LAKEVIEW DR #103
 Address:
 1576 ZENITH WAY

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:
 WESTON, FL 33327

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: ULISES ZAMBRANO PTD 04/28/2005