

P00000104841

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TOLSON COUNTY

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Worldwide Care & Therapy, Corp.
(Name of corporation)

DOCUMENT NUMBER: P00000104841

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anai Sanchez
(Name of contact person)

(Firm/Company)

13515 SW 23 ST
(Address)

MIAMI, FL 33175
(City/state and zip code)

For further information concerning this matter, please call:

Anai Sanchez at (305) 510-8388
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**STATE OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of section 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

The name of the corporation is: Worldwide Care and Therapy, Corp.

The principal office address is: 6741 SW 24 Street, Suite 22 Miami, FL 33155

Date of incorporation is November 6, 2000.

Document Number: P00000104841.

The name and address of the current registered agent on file with the Florida Department of State is:

Idalmis Avila
6741 SW 24 Street, Suite 22
Miami, FL 33155

The name and street address of the new registered agent is:

Osvaldo Vargas
6741 SW 24 Street, Suite 22
Miami, FL 33155

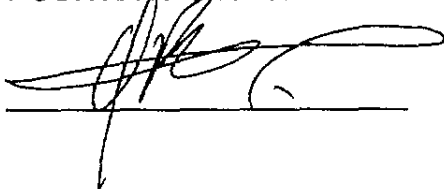
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors.



Agusto Gonzalez/ Director

I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.



October 19, 2004

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04 NOV - 8 AM 9:49
CLERK OF STATE
TALLAHASSEE, FLORIDA