2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004
Secretary of State

DOCUMENT# P01000111376

Entity Name: HOME HEALTH AGENCY-PENNSYLVANIA, INC.

Current Principal Place of Business:

4232 NORTHERN PIKE
#303
MONROEVILLE, PA 15146

New Principal Place of Business:

Current Mailing Address:

11760 W. SAMPLE ROAD
SUITE 105
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-3757322 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
C/O AKERMAN SENTER FITT
350 E. LAS OLAS BLVD., 16TH FLOOR
FORT LAUDERDALE, FL 33301 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: NAPGAL, BEENA
Address: 2530 GARY CIRCLE STE 802
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: NAPGAL, BEENA
Address: 11760 W. SAMPLE ROAD, SUITE 105
City-St-Zip: CORAL SPRINGS, FL 33065

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: BEENA NAGPAL PRES 03/05/2004

Electronic Signature of Signing Officer or Director — Date