

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000092330

Entity Name: SAINT JUDE ADULT CARE, CORP.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

9981 SW 48TH STREET
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

9804 SW 4TH TER
MIAMI, FL 33174

New Mailing Address:

9981 SW 48TH STREET
MIAMI, FL 33165

FEI Number: 04-3709726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, LUCIA
14644 SW 132 AVE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

LEON, LUCIA
9981 SW 48TH STREET
MIAMI, FL 33165 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: LUCIA LEON

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PV () Delete
Name: LEON, LUCIA
Address: 9804 SW 4TH TER
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV (X) Change () Addition
Name: LEON, LUCIA
Address: 9981 SW 48TH STREET
City-St-Zip: MIAMI, FL 33165

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LUCIA LEON, PRESIDENT

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date