2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096833

City-St-Zip:

CORAL GABLES, FL 33146 US

Entity Name: ELDER MANAGED CARE & CONSULTING, INC.

FILED Jan 18, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	JTH ALHAMBR BABLES, FL 33				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX (MIAMI, FL					
FEI Number	r: 41-2061984	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
370 MINC SUITE 6	CK M ESQ. DRCA AVENUE BABLES, FL 33				
	e named entity te of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	JRE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	ampaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	RAMIREZ, JOS) Delete SEFINA R LHAMBRA CIRCLE	Title: (Name: Address:) Change () Addition	

City-St-Zip:

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: JOSEFINA R. RAMIREZ MS. 01/18/2008