

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000122712

FILED
Apr 24, 2012
Secretary of State

Entity Name: CARE CENTRAL HOME HEALTH SERVICES, CORP.

Current Principal Place of Business:

5950 WEST OAKLAND PARK BLVD
#207
LAUDERHILL, FL 33313

New Principal Place of Business:

8753 NW 50TH STREET
LAUDERHILL, FL 33351

Current Mailing Address:

9531 N.W. 38 CT.
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 57-1139642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, CLOVER
9531 N.W. 38 CT.
SUNRISE, FL 33351 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

OFFICERS AND DIRECTORS:

Title: CEO
Name: DIXON, CLOVER
Address: 9531 N.W. 38 CT.
City-St-Zip: SUNRISE, FL 33351

I hereby 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 all other like empowered.

SIGNATURE: CLOVER DIXON

PRES

04/24/2012

Electronic Signature of Signing Officer or Director

Date