

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132162

Entity Name: VITAL CARE OF AMERICA, INC.

FILED
May 03, 2008
Secretary of State

Current Principal Place of Business:

21301 POWERLINE ROAD
306B
BOCA RATON, FL 33433

Current Mailing Address:

21301 POWERLINE ROAD
BOCA RATON, FL 33433

New Principal Place of Business:

21301 POWERLINE ROAD
SUITE 305
BOCA RATON, FL 33433

New Mailing Address:

21301 POWERLINE ROAD
SUITE 305
BOCA RATON, FL 33433

FEI Number: 36-4516004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STONE, FRED
7369 ORANGE WOOD LANE
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

STONE, FRED
6512 NW 57TH LANE
PARKLAND, FL 33067 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:

05/03/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STONE, FRED
Address: 7369 ORANGE WOOD LANE
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: STONE, ARLEEN
Address: 7369 ORANGE WOOD LANE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STONE, FRED
Address: 6512 NW 57TH LANE
City-St-Zip: PARKLAND, FL 33067

Title: D (X) Change () Addition
Name: STONE, ARLEEN
Address: 6512 NW 57TH LANE
City-St-Zip: PARKLAND, FL 33067

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: FRED STONE

D

05/03/2008

Electronic Signature of Signing Officer or Director

Date