

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000069985

FILED
Apr 13, 2007
Secretary of State

Entity Name: LIFELINE HOME HEALTHCARE PROVIDERS, INC.

Current Principal Place of Business:

1425 NW 82ND AVENUE
2ND FLOOR
MIAMI, FL 33126

New Principal Place of Business:

8512 SW 8TH ST
REAR
MIAMI, FL 33144

Current Mailing Address:

1425 NW 82ND AVENUE
2ND FLOOR
MIAMI, FL 33126

New Mailing Address:

8512 SW 8TH ST
REAR
MIAMI, FL 33144

FEI Number: 20-0055571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORGE L. PIEDRA, P.A.
2950 SW 27 AVE
#300
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

PIEDRA, MANUEL A
8512 SW 8TH ST
REAR
MIAMI, FL 33144 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: MANUEL A. PIEDRA

04/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PIEDRA, MANUEL
Address: 4500 LE JEUNE ROAD
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: JONUSAS, EMILIA
Address: 4500 LE JEUNE ROAD
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: RAVELO, JORGE
Address: 4500 LE JEUNE ROAD
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PIEDRA, MANUEL
Address: 8512 SW 8TH ST
City-St-Zip: MIAMI, FL 33144

Title: D (X) Change () Addition
Name: HERNANDEZ, FERNANDO
Address: 8512 SW 8TH ST
City-St-Zip: MIAMI, FL 33144

Title: D (X) Change () Addition
Name: FERNANDEZ, JORGE
Address: 8512 SW 8TH ST
City-St-Zip: MIAMI, FL 33144

I hereby certify that the information supplied with this filing does not qualify for the 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: MANUEL A. PIEDRA

D

04/13/2007

Electronic Signature of Signing Officer or Director

Date