2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000071168

Entity Name: MY COMPLETE CARE, INC.

FILED Jan 18, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

323 ELM ST, SUITE 5 571604 ARBOR CLUB WAY HOLLYWOOD, FL 33019 BOCA RATON, FL 33433

Current Mailing Address: New Mailing Address:

323 ELM ST, SUITE 5 571604 ARBOR CLUB WAY HOLLYWOOD, FL 33019 BOCA RATON, FL 33433

FEI Number: 33-1063321 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARVELO, EDGAR
323 ELM STREET
571604 ARBOR CLUB WAY
SUITE 5
HOLLYWOOD, FL 33019 US

ARVELO, EDGAR
571604 ARBOR CLUB WAY
BOCA RATON, FL 33433 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: EDGAR ARVELO 01/18/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: ARVELO, EDGAR

Address: 571604 ARBOR CLUB WAY City-St-Zip: BOCA RATON, FL 33433

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: EDGAR ARVELO PRES 01/18/2012