

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082894

FILED
Jan 06, 2005
Secretary of State

Entity Name: MYRIAD HOME HEALTH SERVICES, INC.

Current Principal Place of Business:

5740 HOLLYWOOD BLVD SUITE 203
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

5740 HOLLYWOOD BLVD SUITE 203
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 75-3127519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUGAR, STEPHEN
5740 HOLLYWOOD BLVD., STE. 203
HOLLYWOOD, FL 33021 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SAMPANG, FLORA
Address: 4320 MONTROSE AVENUE
City-St-Zip: CHICAGO, IL 60641

Title: D () Delete
Name: SUGAR, MONICA J
Address: 9465 BAY DRIVE
City-St-Zip: SURFSIDE, FL 33154

Title: D () Delete
Name: SUGAR, JUDY J
Address: 9350 RIDGEWAY
City-St-Zip: EVANSTON, IL 60203

Title: VP () Delete
Name: SUGAR, STEPHEN
Address: 9465 BAY DRIVE
City-St-Zip: SURFSIDE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN SUGAR

VP

01/06/2005

Electronic Signature of Signing Officer or Director

Date