

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000119370

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** ADVANCE INCARE SUPPLY GROUP, INC.

**Current Principal Place of Business:**

551 EAST 49 STREET  
SUITE 11  
HIALEAH, FL 33013 US

**New Principal Place of Business:**

**Current Mailing Address:**

551 EAST 49 STREET  
SUITE 11  
HIALEAH, FL 33013 US

**New Mailing Address:**

**FEI Number:** 11-3706529

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FERRERO, JOAQUIN  
3587 NW 102 STREET  
MIAMI, FL 33147 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:** D  
**Name:** FERRERO, JOAQUIN M  
**Address:** 3587 NW 102 STREET  
**City-St-Zip:** MIAMI, FL 33147 US

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:** JOAQUIN FERRERO

D

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date