

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000123670

FILED
Apr 26, 2005
Secretary of State

Entity Name: SUNSHINE HOME HEALTH CARE SERVICES INC

Current Principal Place of Business:

16300 NE 19TH AVE., #223
N MIAMI BEACH, FL 33162 US

New Principal Place of Business:

1875 NE 163RD STREET
N MIAMI BEACH, FL 33162 US

Current Mailing Address:

16300 NE 19TH AVE., #223
N MIAMI BEACH, FL 33162 US

New Mailing Address:

1875 NE 163RD STREET
N MIAMI BEACH, FL 33162 US

FEI Number: 20-0359003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIGARIO, RIZALINA
16961 NE 16 AVENUE
N MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

OLEGARIO, RIZALINA
16961 NE 16 AVENUE
N MIAMI BEACH, FL 33162 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: RIZALINA P. OLEGARIO

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OLIGARIO, RIZALINA
Address: 16961 NE 16 AVENUE
City-St-Zip: N MIAMI BEACH, FL 33162 US

Title: V () Delete
Name: VARATHAJAN, EMERITA G
Address: 16961 NE 16 AVENUE
City-St-Zip: N MIAMI BEACH, US 33162 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OLEGARIO, RIZALINA
Address: 16961 NE 16 AVENUE
City-St-Zip: N MIAMI BEACH, FL 33162 US

Title: V (X) Change () Addition
Name: VARATHAJAN, EMERITA G
Address: 111 NW 85TH COURT
City-St-Zip: MIAMI, US 33126 US

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: RIZALINA OLEGARIO

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date