

P04000004574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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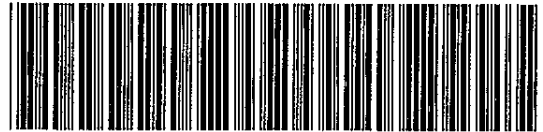
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.A. Chang

C. Coulllette JUL 20 2005

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VITAL Homecare of Florida, INC
(Name of corporation)

DOCUMENT NUMBER: P04000004574

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALAN H. VAN HEUSEN
(Name of contact person)

VITAL Homecare of Florida, INC
(Firm/Company)

3923 LAKE WORTH RD #205
(Address)

LAKE WORTH, FL 33461
(City/state and zip code)

For further information concerning this matter, please call:

ALAN VAN HEUSEN at (561) 965-6771
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: VITAL HOME CARE OF FLORIDA, INC.
2. The principal office address: 3923 LAKE WORTH RD #205
LAKE WORTH, FL 33461
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1-5-2004 Document number: P04000004574

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

SPIEGEL & UTRERA, PA

1840 SW 22ND ST 4TH FL

MIAMI, FL 33145

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ALAN H. VAN HEUSEN

3923 LAKE WORTH RD #205

(P.O. Box NOT acceptable)

LAKE WORTH, FL 33461

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Victoria Nwabeke

(Signature of an officer or director)

VICTORIA NWABEKE, OWNER

(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Alan H. Van Heusen

(Signature of Registered Agent)

July 8, 2005

(Date)

If signing on behalf of an entity:

ALAN H. VAN HEUSEN

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FL 32314