

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90091 040 ***150.00

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1. Entity Name
L R L HOME HEALTH, CORP.



Principal Place of Business

6741 S.W. 24TH ST.
SUITE 18
MIAMI, FL 33155

Mailing Address

6741 S.W. 24TH ST.
SUITE 18
MIAMI, FL 33155

50011162



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

43-2040787

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAMOS, LAZARO
9721 SW 162ND ST.
MIAMI, FL 33157

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME RAMOS, LAZARO
STREET ADDRESS 3750 N 16TH AVENUE
CITY-ST-ZIP HIALEAH, FL 33012

TITLE PD ☒ Change ☐ Addition
NAME RAMOS, LAZARO
STREET ADDRESS 9721 SW 162 ST.
CITY-ST-ZIP MIAMI, FL 33157

TITLE VD ☐ Delete
NAME DIAZ, RAFAEL
STREET ADDRESS 3750 N 16TH AVENUE
CITY-ST-ZIP HIALEAH, FL 33012

TITLE VD ☒ Change ☐ Addition
NAME DIAZ, RAFAEL
STREET ADDRESS 6450 ARTHUR ST.
CITY-ST-ZIP HOLLYWOOD, FL 33024-5831

TITLE SD ☐ Delete
NAME GARCIA, LAZARO
STREET ADDRESS 3750 N 16TH AVENUE
CITY-ST-ZIP HIALEAH, FL 33012

TITLE SD ☒ Change ☐ Addition
NAME GARCIA, LAZARO
STREET ADDRESS 3800 PALM AVE. #108
CITY-ST-ZIP HIALEAH, FL 33012

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAZARO RAMOS

Date

2/3/05 786 3678657

Daytime Phone #