

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000014486

Entity Name: L R L HOME HEALTH, CORP.

FILED
Jan 03, 2008
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

7184 S.W. 47TH ST
MIAMI, FL 33155

Current Mailing Address:

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

New Mailing Address:

7184 S.W. 47TH ST.
MIAMI, FL 33155

FEI Number: 43-2040787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

RAMOS, LAZARO
13103 S.W. 186TH TR.
MIAMI, FL 33177 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: LAZARO RAMOS

01/03/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAMOS, LAZARO
Address: 9721 SW 162 ST
City-St-Zip: MIAMI, FL 33157

Title: VD () Delete
Name: DIAZ, RAFAEL
Address: 6450 ARTHUR ST
City-St-Zip: HOLLYWOOD, FL 330245831

Title: SD () Delete
Name: GARCIA, LAZARO
Address: 3800 PALM AVE #108
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RAMOS, LAZARO
Address: 13103 S.W. 186TH TR.
City-St-Zip: MIAMI, FL 33177

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 exemption stated in Chapter 119, 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: LAZARO RAMOS

PD

01/03/2008

Electronic Signature of Signing Officer or Director

Date