

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040056

FILED  
May 01, 2008  
Secretary of State

Entity Name: SKILL HOME HEALTH CARE CORP.

## Current Principal Place of Business:

2720 SW 97TH AVE  
SUITE 104  
MIAMI, FL 33165

## New Principal Place of Business:

2760 SW 97TH AVE  
SUITE 111  
MIAMI, FL 33165

## Current Mailing Address:

2720 SW 97TH AVE  
SUITE 104  
MIAMI, FL 33165

## New Mailing Address:

2760 SW 97TH AVE  
SUITE 111  
MIAMI, FL 33165

FEI Number: 37-1486576

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELGADO, JULIO C  
3335 SW 95 CT  
MIAMI, FL 33165 US

## Name and Address of New Registered Agent:

DELGADO, JULIO C  
18600 SW 100 ST  
MIAMI, FL 33196 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: JULIO DELGADO

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DELGADO, JULIO C  
Address: 3335 SW 95 CT  
City-St-Zip: MIAMI, FL 33165

Title: V ( ) Delete  
Name: RODRIGUEZ, ROXANA  
Address: 3335 SW 95 CT  
City-St-Zip: MIAMI, FL 33165

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DELGADO, JULIO C  
Address: 18600 SW 100 ST  
City-St-Zip: MIAMI, FL 33196

Title: V (X) Change ( ) Addition  
Name: RODRIGUEZ, ROXANA  
Address: 18600 SW 100 ST  
City-St-Zip: MIAMI, FL 33196

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: JULIO DELGADO

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date