

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000045549

FILED
Feb 17, 2010
Secretary of State

Entity Name: PRO-LIFE HOME HEALTH SERVICES INC.

Current Principal Place of Business:

7401 NW 7 ST
2
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

7401 NW 7 ST
2
MIAMI, FL 33126

New Mailing Address:

FEI Number: 11-3714622 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEYVA, ADA C
7401 NW 7 ST
2
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD
Name: LEYVA, ADA C
Address: 7401 NW 7 ST, SUITE 2
City-St-Zip: MIAMI, FL 33126

Title: VT
Name: OTANO, IRENE
Address: 7401 NW 7 ST, SUITE 2
City-St-Zip: MIAMI, FL 33126

I hereby 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 all other like empowered.

SIGNATURE: ADA LEYVA

PRES

02/17/2010

Electronic Signature of Signing Officer or Director

Date