

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082236

FILED
Feb 17, 2011
Secretary of State

Entity Name: SANACARE HOME HEALTH SOLUTIONS, INC.

Current Principal Place of Business:

100 E LINTON BLVD STE 300A
DELRAY BEACH, FL 33483

New Principal Place of Business:

100 E LINTON BLVD
300A
DELRAY BEACH, FL 33483

Current Mailing Address:

100 E LINTON BLVD STE 300A
DELRAY BEACH, FL 33483

New Mailing Address:

100 E LINTON BLVD
300A
DELRAY BEACH, FL 33483

FEI Number: 75-3157604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLVEREA, MIHAELA R
2901 FIORE WAY
203C
DELRAY BEACH, FL 33445 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: POLVEREA, MIHAELA R
Address: 2901 FIORE WAY
City-St-Zip: DELRAY BEACH, FL 33445

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: MIHAELA R. POLVEREA

PRES

02/17/2011

Electronic Signature of Signing Officer or Director

Date