

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091891

FILED
Mar 13, 2007
Secretary of State

Entity Name: LAZARO HOME HEALTH CARE INC.

Current Principal Place of Business:

11401 SW 40TH STREET
SUITE 324
MIAMI, FL 33165

New Principal Place of Business:

11401 SW 40TH STREET
SUITE 245
MIAMI, FL 33165

Current Mailing Address:

11401 SW 40TH STREET
SUITE 324
MIAMI, FL 33165

New Mailing Address:

11401 SW 40TH STREET
SUITE 245
MIAMI, FL 33165

FEI Number: 03-0543704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLERA, YOSVANY
14460 SW 9TH STREET
MIAMI, FL 33184 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: PD () Delete
Name: COLLERA, YOSVANY
Address: 14460 SW 9 STREET
City-St-Zip: MIAMI, FL 33184

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: YOSVANY COLLERA

PD

03/13/2007

Electronic Signature of Signing Officer or Director

_____ Date