2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120507

Entity Name: TROPICAL HEALTH & HOMECARE SERVICES, INC.

FILED Mar 27, 2008 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place of Business:	New Principal Place of Business:		
160 NW 13 SUITE 309 MIAMI GAI		3166 US	160 NW 176TH ST. SUITE 309 MIAMI GARDENS, FL 33169 US			
Current M	lailing Addres	ss:	New Mailing Address:	New Mailing Address:		
160 NW 17 SUITE 309 MIAMI GAI		3166 US	160 NW 176TH ST. SUITE 309 MIAMI GARDENS, FL 33169 US			
FEI Number:	: 20-1137825	FEI Number Applied For () FEI Number Not Applicable () Certificate of Status	Desired ()		
Name and Address of Current Registered Agent:			t: Name and Address of New Registered A	Name and Address of New Registered Agent:		
APT. 417 NORTH M The above	DAIRY RD. IIAMI BEACH,	FL 33179 US submits this statement for	the purpose of changing its registered office or registered a	agent, or both,		
SIGNATU	RE:					
	Electron	nic Signature of Registered	d Agent Date	_		
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	LATIMER, JOA 655 IVES DAIR) Delete NNA S RY RD. APT. 417 BEACH, FL 33179 US	Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address:	REID, CHEDDI) Delete I V RY RD. APT. 417	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: CHEDDI REID P 03/27/2008

NORTH MIAMI BEACH, FL 33179 US

City-St-Zip: