2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# P04000120507

Entity Name: TROPICAL HEALTH & HOMECARE SERVICES, INC.

Current Principal Place of Business:

160 NW 176TH ST.
SUITE 309
MIAMI GARDENS, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

160 NW 176TH ST.
SUITE 309
MIAMI GARDENS, FL 33169 US

New Mailing Address:

FEI Number: 20-1137825 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

REID, CHEDDI V
655 IVES DAIRY RD.
APT. 417
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

REID, CHEDDI V
3221 SW 187 TERRACE
MIRAMAR, FL 33029 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: 03/05/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: LATIMER, JOANNA S
Address: 655 IVES DAIRY RD. APT. 417
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: P ( ) Delete
Name: REID, CHEDDI V
Address: 655 IVES DAIRY RD. APT. 417
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: LATIMER, JOANNA S
Address: 3221 SW 187 TERRACE
City-St-Zip: MIRAMAR, FL 33029 US

Title: P (X) Change ( ) Addition
Name: REID, CHEDDI V
Address: 3221 SW 187 TERRACE
City-St-Zip: MIRAMAR, FL 33029 US

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 03/05/2009
Electronic Signature of Signing Officer or Director — Date