

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123230

FILED
Apr 18, 2007
Secretary of State

Entity Name: FLORIDA HOME HEALTH CARE PROVIDERS, INC.

Current Principal Place of Business:

1779 W 37TH STREET
UNIT 15, SECOND FLOOR
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

1779 W 37TH STREET
UNIT 15, SECOND FLOOR
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 32-0124867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREYRE, GISELLE RN
2700 SW 194 TERR
MIRAMAR, FL 33029 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: P,S () Delete
Name: FREYRE, GISELLE RN
Address: 2700 SW 194 TERR
City-St-Zip: MIRAMAR, FL 33029 US

Title: VP,T () Delete
Name: FREYRE, GISELLE M
Address: 2700 SW 194 TERR
City-St-Zip: MIRAMAR, FL 33029 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP,T (X) Change () Addition
Name: VALLADARES, GISELA T
Address: 19428 SW 27 STREET
City-St-Zip: MIRAMAR, FL 33029 US

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: GISELLE FREYRE

P,S

04/18/2007

Electronic Signature of Signing Officer or Director

_____ Date