

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000125562

FILED
Jul 13, 2005
Secretary of State

Entity Name: CLAUDIA'S NURSING HOME, INC.

Current Principal Place of Business:

PO BOX 440084
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

PO BOX 440084
MIAMI, FL 33144

New Mailing Address:

FEI Number: 20-1590178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIBERTY BUSINESS SERVICES, INC.
8202 NW 103RD STREET
HIALEAH GARDENS, FL 33016 US

Name and Address of New Registered Agent:

CALVO, YAMILET
3350 NW 94TH TERRACE
MIAMI, FL 33144 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: YAMILET CALVO

07/13/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CALVO, YAMILET
Address: 3350 NW 94TH TERRACE
City-St-Zip: MIAMI, FL 33144

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 Section 119.07(3)(i), 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: YAMILET CALVO

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07/13/2005

Electronic Signature of Signing Officer or Director

Date