

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000153872

FILED
Jun 14, 2011
Secretary of State

Entity Name: BEST CHOICE HOME HEALTH CARE INC

Current Principal Place of Business:

7333 SW 24 ST
SUITE 240
MIAMI, FL 33155

New Principal Place of Business:

7333 SW 24 ST
SUITE 240
MIAMI, FL 33155 US

Current Mailing Address:

7333 SW 24 ST
SUITE 240
MIAMI, FL 33155

New Mailing Address:

7333 SW 24 ST
SUITE 240
MIAMI, FL 33155 US

FEI Number: 20-1869691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, LEOPOLDO L
7333 SW 24 ST
SUITE 240
MIAMI, FL 33155 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

OFFICERS AND DIRECTORS:

Title: PD
Name: PEREZ, LEOPOLDO L
Address: 7333 SW 24 ST-240
City-St-Zip: MIAMI, FL 33155

Title: VPD
Name: PEREZ, LILIANA
Address: 7333 SW 24 ST-240
City-St-Zip: MIAMI, FL 33155

Title: TD
Name: PEREZ, CESAR
Address: 7333 SW 24 ST-240
City-St-Zip: MIAMI, FL 33155

I hereby 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 all other like empowered.

SIGNATURE: LEOPOLDO PEREZ

P

06/14/2011

Electronic Signature of Signing Officer or Director

Date