2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2011
Secretary of State

DOCUMENT# P04000161978

Entity Name: EXPERIENCARE, INC.

Current Principal Place of Business:

6372 SW 28 ST
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 558264
MIAMI, FL 33255 US

New Mailing Address:

FEI Number: 20-2091708 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRANCO, MARIA M
6372 SW 28TH ST
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: P
Name: FRANCO, MARIA M
Address: 6372 SW 28 ST
City-St-Zip: MIAMI, FL 33155 US

Title: S
Name: ARBOLI, FRANCISCO J
Address: 6372 SW 28 ST
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: MARIA MERCEDES FRANCO PRES 04/19/2011

Electronic Signature of Signing Officer or Director Date