

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000005183

FILED  
Apr 19, 2010  
Secretary of State

Entity Name: PERFECT CARE INC.

## Current Principal Place of Business:

5801 NW 151 STREET  
SUITE 107  
MIAMI LAKES, FL 33014

## New Principal Place of Business:

15291 NW 60TH AVENUE  
SUITE 200  
MIAMI LAKES, FL 33014

## Current Mailing Address:

5801 NW 151 STREET  
SUITE 107  
MIAMI LAKES, FL 33014

## New Mailing Address:

15291 NW 60TH AVENUE  
SUITE 200  
MIAMI LAKES, FL 33014

FEI Number: 25-1908208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HARTMAN, CARMEN  
5801 NW 151 STREET  
SUITE 107  
MIAMI LAKES, FL 33014 US

## Name and Address of New Registered Agent:

HARTMAN, CARMEN  
15291 NW 60TH AVENUE  
SUITE 200  
MIAMI LAKES, FL 33014 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: CARMEN HARTMAN

04/19/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P  
Name: HARTMAN, CARMEN  
Address: 15291 NW 60TH AVENUE SUITE 200  
City-St-Zip: MIAMI LAKES, FL 33014

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: CARMEN HARTMAN

P

04/19/2010

Electronic Signature of Signing Officer or Director

Date