

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000011871

Entity Name: P AND A HOME HEALTH,INC.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

6300 S DIXIE HWY STE 101
W PALM BCH, FL 33405

New Principal Place of Business:

2760 S.W. 97 AVE
NO. 109
MIAMI, FL 33165

Current Mailing Address:

6300 S DIXIE HWY STE 101
W PALM BCH, FL 33405

New Mailing Address:

2760 SW 97 AVE
109
MIAMI, FL 33165

FEI Number: 20-2223505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, PATRICIA
6300 S DIXIE HWY STE 101
W PALM BCH, FL 33405 US

Name and Address of New Registered Agent:

SAAVEDRA, ANGELA
2760 SW 97 AVE
109
MIAMI, FL 33165 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: ANGELA SAAVEDRA

05/01/2007

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: PD () Delete
Name: SAAVEDRA, ANGELA
Address: 6300 S DIXIE HWY STE 101
City-St-Zip: W PALM BCH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAAVEDRA, ANGELA
Address: 2760 SW 97 AVE STE 109
City-St-Zip: MIAMI, FL 33165

I hereby certify that the information supplied with this filing does not qualify 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: ANGELA SAAVEDRA

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date