

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021128

Entity Name: SERRADET NURSING, INC.

FILED  
Mar 10, 2006  
Secretary of State

## Current Principal Place of Business:

19200 EAST LAKE DR.  
MIAMI, FL 33015

## New Principal Place of Business:

5100 SW 129 TERRACE  
MIRAMAR, FL 33027

## Current Mailing Address:

19200 EAST LAKE DR.  
MIAMI, FL 33015

## New Mailing Address:

5100 SW 129 TERRACE  
MIRAMAR, FL 33027

FEI Number: 20-2129837

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SERRADET, ARMANDO A  
19200 EAST LAKE DR.  
MIAMI, FL 33015 US

## Name and Address of New Registered Agent:

SERRADET, ARMANDO A  
5100 SW 129 TERRACE  
MIRAMAR, FL 33027 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: ARMANDO A. SERRADET

03/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SERRADET, ARMANDO A  
Address: 19200 EAST LAKE DR.  
City-St-Zip: MIAMI, FL 33015

Title: VP ( ) Delete  
Name: DE PAULA, LEYDI  
Address: 19200 EAST LAKE DR.  
City-St-Zip: MIAMI, FL 33015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SERRADET, ARMANDO A  
Address: 5100 SW 129 TERRACE  
City-St-Zip: MIRAMAR, FL 33027

Title: VP (X) Change ( ) Addition  
Name: DE PAULA, LEYDI  
Address: 5100 SW 129 TERRACE  
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the 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: ARMANDO A. SERRADET

P

03/10/2006

Electronic Signature of Signing Officer or Director

Date