

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034221

FILED
Feb 08, 2011
Secretary of State

Entity Name: FLORIDA HOME HEALTH AGENCY, INC.

Current Principal Place of Business:

770 PONCE DE LEON BLVD
301
CORAL GABLES, FL 33134

New Principal Place of Business:

1275 WEST 47 TH PLACE
301
HIALEAH, FL 33012

Current Mailing Address:

770 PONCE DE LEON BLVD
301
CORAL GABLES, FL 33134

New Mailing Address:

1275 WEST 47 TH PLACE
301
HIALEAH, FL 33012

FEI Number: 20-2480505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLINA, JAVIER
770 PONCE DE LEON BLVD
STE 301
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MOLINA, JAVIER
1275 WEST 47 TH PLACE
STE 301
HIALEAH, FL 33012 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: JAVIER MOLINA

02/08/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PS
Name: MOLINA, JAVIER
Address: 1275 WEST 47TH PLACE SUITE 301
City-St-Zip: HIALEAH, FL 33012

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: JAVIER MOLINA

PS

02/08/2011

Electronic Signature of Signing Officer or Director

Date