

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000059663

FILED
Apr 17, 2007
Secretary of State

Entity Name: ASSISTANCE REQUIRED CARE SERVICES, INC.

Current Principal Place of Business:

2215 - C NORTH MILITARY TRAIL
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

2215 - C NORTH MILITARY TRAIL
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 20-2716290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASHOFSKY AND ASSOCIATES, PA
1876 N. UNIVERSITY DRIVE
STE. 200-E
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

ACCOUNTING MANAGEMENT ADVISORS, INC.
4175 S. CONGRESS AVENUE
SUITE J
LAKE WORTH, FL 33461 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: ELISA A. ARMETTA, CPA

04/17/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WHITE, CAROL P
Address: PO BOX 220674
City-St-Zip: WEST PALM BEACH, FL 33422

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WHITE, CAROL P
Address: PO BOX 220674
City-St-Zip: WEST PALM BEACH, FL 33422

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: CAROL WHITE

P

04/17/2007

Electronic Signature of Signing Officer or Director

Date