2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006
Secretary of State

DOCUMENT# P05000068599

Entity Name: VICTORIAN HOME CARE, INC.

Current Principal Place of Business:

4610 NW 113TH TERRACE
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

4610 NW 113TH TERRACE
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 75-3203613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STODDARD-DANIELS, DOROTHY
9310 NW 31ST PLACE
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

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: _____

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: V ( ) Delete
Name: LILAVOIS, PATRICK
Address: 5006 HANA ROAD
City-St-Zip: EDISON, NJ 08817

Title: V ( ) Delete
Name: LILAVOIS, ALDY
Address: 12 TINA LANE
City-St-Zip: BURLINGTON, NJ 08016

Title: T ( ) Delete
Name: STODDARD-DANIELS, DOROTHY
Address: 4610 NW 113TH TERRACE
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DOROTHY DANIELS T 05/02/2006

Electronic Signature of Signing Officer or Director Date