

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000077748

FILED  
Apr 28, 2011  
Secretary of State

Entity Name: AMERICAN HOME HEALTH CARE, CORP.

**Current Principal Place of Business:**

11880 BIRD RD  
402  
MIAMI, FL 33175

**New Principal Place of Business:**

**Current Mailing Address:**

11880 BRID RD  
402  
MIAMI, FL 33175

**New Mailing Address:**

FEI Number: 20-2919107

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GUERRA, KATIUSKA  
14931 SW 30TH TERRACE  
MIAMI, FL 33185 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GUERRA, KATIUSKA  
Address: 14931 SW 30TH TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: VP  
Name: GUERRA, CLOTILDE  
Address: 14931 SW 30 TERR  
City-St-Zip: MIAMI, FL 33185

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: CLOTILDE GUERRA

VP

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date