

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90088 020 ***150.00

DOCUMENT # P05000079587		
1. Entity Name MED HOPE CARE CENTER, INC.		

Principal Place of Business 12519 CARA CARA LOOP BRADENTON, FL 34212 US	Mailing Address 12519 CARA CARA LOOP BRADENTON, FL 34212 US
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2. Principal Place of Business 4401 85th Ave. Circle East	3. Mailing Address 4401 85th Ave. Circle East
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Parrish, Florida	City & State Parrish, Florida
Zip 34219	Country U.S.A

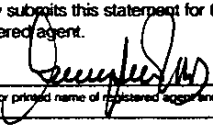
02112006 Chg-P CR2E034 (11/05)

4. FEI Number 020744373	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**SUAREZ, GUILLERMO
12519 CARA CARA LOOP
BRADENTON, FL 34212**

7. Name and Address of New Registered Agent
Name **Suarez, Guillermo**
Street Address (P.O. Box Number is Not Acceptable)
4401 85th Avenue Circle East
City **Parrish** FL Zip Code **34219**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **02/11/06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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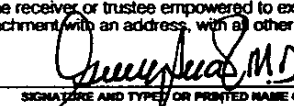
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SUAREZ, GUILLERMO 12519 CARA CARA LOOP BRADENTON, FL 34212	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Suarez, Guillermo 4401 85th Avenue Circle East Parrish, Florida 34219	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Luz Mildred Suarez 4401 85th Ave Circle East Parrish, FL 34219	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **02/11/06** 727 415-1395
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR