

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082645

Entity Name: JUANITO HOME CARE INC

FILED
Jan 15, 2008
Secretary of State

Current Principal Place of Business:

2500 N.W. 79 AVE., STE. 123
DORAL, FL 33122

New Principal Place of Business:

2500 N.W. 79 AVE.
SUITE 123
DORAL, FL 33122

Current Mailing Address:

2500 N.W. 79 AVE., STE. 123
DORAL, FL 33122

New Mailing Address:

2500 N.W. 79 AVE.
SUITE 123
DORAL, FL 33122

FEI Number: 20-2971239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REINOSO, CIRILO E
61 NW 40 AVE
MIAMI, FL 33126 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: REINOSO, CIRILO E
Address: 61 NW 40TH AVE
City-St-Zip: MIAMI, FL 33126

Title: VD (X) Delete
Name: GARCIA, GABRIELA
Address: 525 SW 146 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33011

Title: S () Delete
Name: TORRES, ROBERT
Address: 9450 NW 58TH ST STE. 104
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: TORRES, ROBERT
Address: 9450 NW 58TH ST STE. 104
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify 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: CIRILO EDUARDO REINOSO

PSD

01/15/2008

Electronic Signature of Signing Officer or Director

Date