

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106919

**FILED**  
**Apr 27, 2006**  
**Secretary of State**

**Entity Name:** CARYCIA NURSING SERVICES INC.

**Current Principal Place of Business:**

1750 WEST 46 STREET  
518  
HIALEAH, FL 33013 US

**New Principal Place of Business:**

1328 BIARRITZ DR  
MIAMI BEACH, FL 33141 US

**Current Mailing Address:**

1750 WEST 46 STREET  
518  
HIALEAH, FL 33013 US

**New Mailing Address:**

1328 BIARRITZ DR  
MIAMI BEACH, FL 33141 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

RODRIGUEZ, CARIDAD A  
1750 WEST 46 STREET  
518  
HIALEAH, FL 33013 US

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

RODRIGUEZ, CARIDAD A  
1328 BIARRITZ DR  
MIAMI BEACH, FL 33141 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: \_\_\_\_\_ 04/27/2006  
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RODRIGUEZ, CARIDAD A  
Address: 1750 WEST 46 STREET APT# 518  
City-St-Zip: HIALEAH, FL 33013 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: RODRIGUEZ, CARIDAD A  
Address: 1328 BIARRITZ DR  
City-St-Zip: MIAMI BEACH, FL 33141 US

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: CARIDAD A RODRIGUEZ P 04/27/2006  
Electronic Signature of Signing Officer or Director Date