

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000115459

FILED  
May 08, 2009  
Secretary of State

Entity Name: FLORIDACARE HOME HEALTH, CORP.

**Current Principal Place of Business:**

6801 NW 77 AVE  
102  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

6801 NW 77 AVE  
102  
MIAMI, FL 33166

**New Mailing Address:**

FEI Number: 20-3331390      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RODRIGUEZ, YOVAN  
6801 NW 77 AVE  
102  
MIAMI, FL 33166 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: PTD ( ) Delete  
Name: RODRIGUEZ, YOVAN  
Address: 6801 NW 77 AVE  
City-St-Zip: MIAMI, FL 33166

Title: VP/S ( ) Delete  
Name: RODRIGUEZ, CARLOS  
Address: 6801 NW 77 AVE  
City-St-Zip: MIAMI, FL 33166

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

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 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: YOVAN RODRIGUEZ

PRES

05/08/2009

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

\_\_\_\_\_ Date