## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000128290

**FILED** Mar 13, 2006 Secretary of State

Entity Name: STATEWIDE HOME HEALTH, INC **Current Principal Place of Business: New Principal Place of Business:** 400 N. PINE ISLAND RD., 2ND FLOOR, #203 PLANTATION, FL 33324 **Current Mailing Address: New Mailing Address:** 400 N. PINE ISLAND RD., 2ND FLOOR, #203 PLANTATION, FL 33324 FEI Number: 13-4308435 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RODRIGUEZ, MARIBEL F 8838 W. FLAGLER ST., STE. 207 MIAMI, FL 33174 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition RIDRIGUEZ, MARIBEL RODRIGUEZ, MARIBEL Name: Name: 8838 W. FLAGLER ST., STE. 207 Address: Address:

8838 W. FLAGLER ST., STE. 207 City-St-Zip: MIAMI, FL 33174 City-St-Zip: MIAMI, FL 33174

( ) Delete Title: Title: () Change () Addition TRIGOSO, JOSE Name: Name:

6305 SW 161 PLACE Address: Address: MIAMI, FL 33193 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

Ρ SIGNATURE: MARIBEL RODRIGUEZ 03/13/2006