2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131267

Entity Name: CARE PLUS HOME HEALTH AGENCY INC.

FILED Apr 27, 2010 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
352 NE 16 SUITE D MIAMI, FL					
Current Mailing Address:			New Mailing Address:		
352 NE 16 SUITE D MIAMI, FL					
FEI Number:	59-3829080	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MORIN, MA 14855 SW MIRAMAR,		US			
	named entity of Florida.	y submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financi	ng Trust Fund Contribution ().			
OFFICERS	AND DIRE	CTORS:			
Title: Name: Address: City-St-Zip:	D MORIN, MAR 14855 SW 39 MIRAMAR, FI	OCT .			

Title: DS

Name: MORIN, WILFRID Address: 14855 SW 39 CT City-St-Zip: MIRAMAR, FL 33027

I hereby 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 all other like empowered.

SIGNATURE: MARIE MAUD MORIN D 04/27/2010