2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 31, 2008 08:00 AN Secretary of State DOCUMENT # P05000150113 SWEET HOME CARE, INC. Principal Place of Business Mailing Address 5920 SW 2ND ST. 5920 SW 2ND ST. MIAMI, FL 33144 MIAMI, FL 33144 02062008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0849717 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AGUILA, FLORENTINO DO NOT WRITE 5920 SW 2ND ST. MIAMI, FL 33144 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DP TITLE NAME AGUILA, FLORENTINO STREET ADDRESS 5920 SW 2ND ST, CITY-ST-ZIP MIAMI, FL 33144 U00000874170 TITLE 04/10/08-80105-024 150.00 NAME SIGLER, EMELINA STREET ADDRESS 5920 SW 2ND ST, CITY-ST-ZIP MIAMI, FL 33144 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP tare IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with any address with all other like empowered.

FILED