

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000005971

**FILED**  
**Jul 23, 2010**  
**Secretary of State**

**Entity Name:** TITE HOME HEALTH CARE, INC.

**Current Principal Place of Business:**

14750 SW 26 ST.  
STE 216  
MIAMI, FL 33185

**New Principal Place of Business:**

**Current Mailing Address:**

14750 SW 26 ST.  
STE 216  
MIAMI, FL 33185

**New Mailing Address:**

**FEI Number:** 65-1269418

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ENRIQUE, YOEL  
10000 SW 44 STREET  
MIAMI, FL 33165 US

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

ENRIQUEZ, YOEL  
3510 SW 136 AVE  
MIAMI, FL 33175 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: YOEL ENRIQUEZ

07/23/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: ENRIQUEZ, YOEL  
Address: 3510 SW 136 AVE  
City-St-Zip: MIAMI, FL 33175

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: YOEL ENRIQUEZ

PRES

07/23/2010

Electronic Signature of Signing Officer or Director

Date