2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2008
Secretary of State

DOCUMENT# P06000008830

Entity Name: PROFESSIONAL BILINGUAL HOME CARE SERVICES INC

Current Principal Place of Business:

6816 32ND AVE S.
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

6816 32ND AVE S.
TAMPA, FL 33619

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLE, KATHY L
205 W MLKING BLVD
204
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

COLE, KATHY L
309 W MLKING BLVD
TAMPA, FL 33603 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: 07/15/2008
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: P ( ) Delete
Name: STEWART, LUCILA V
Address: 7207 LILY PAD LANE
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LUCYSTEWART DIR 07/15/2008
Electronic Signature of Signing Officer or Director — Date