

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000013268

Entity Name: EXCEL HOMECARE INC.

FILED
Feb 06, 2007
Secretary of State

Current Principal Place of Business:

11849 SOUTHWEST 273RD LANE
HOMESTEAD, FL 33032

New Principal Place of Business:

10711 SW 216 STREET
212
MIAMI, FL 33170

Current Mailing Address:

11849 SOUTHWEST 273RD LANE
HOMESTEAD, FL 33032

New Mailing Address:

10711 SW 216 STREET
212
MIAMI, FL 33170

FEI Number: 22-3920843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: OHAETO, OBIOHA
Address: 11849 SOUTHWEST 273RD LANE
City-St-Zip: HOMESTEAD, FL 33032

Title: VD () Delete
Name: ANYAKUDO, FESTUS I
Address: 11849 SOUTHWEST 273RD LANE
City-St-Zip: HOMESTEAD, FL 33032

Title: SD () Delete
Name: OHAETO, ADAEZE
Address: 11849 SOUTHWEST 273RD LANE
City-St-Zip: HOMESTEAD, FL 33032

Title: TD () Delete
Name: ANYAKUDO, ONYINYE
Address: 11849 SOUTHWEST 273RD LANE
City-St-Zip: HOMESTEAD, FL 33032

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 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: O OHAETO

P

02/06/2007

Electronic Signature of Signing Officer or Director

Date