

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000027169

FILED
Apr 26, 2007
Secretary of State

Entity Name: HOLISTIC NURSING CARE AGENCY INC

Current Principal Place of Business:

7400 NW 7TH ST., SUITE 201
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

7400 NW 7TH ST., SUITE 201
MIAMI, FL 33126

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:

LABRADA, LARZA B
15675 SW 9TH LANE
MIAMI, FL 33194 US

Name and Address of New Registered Agent:

LABRADA, LAIZA B
15675 SW 9TH LANE
MIAMI, FL 33194 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: LAIZA B LABRADA

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LABRADA, LAIZA B
Address: 15675 SW 9TH LANE
City-St-Zip: MIAMI, FL 33194

Title: SD () Delete
Name: PEREZ, MARIA
Address: 2715 SW 137TH PLACE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LAIZA B LABRADA

PD

04/26/2007

Electronic Signature of Signing Officer or Director

Date