

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036466

FILED  
Feb 04, 2009  
Secretary of State

Entity Name: FUTURE CARE SOLUTION, INC.

## Current Principal Place of Business:

6555 NW 36 STREET  
117  
VIRGINIA GARDENS, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

6555 NW 36 STREET  
117  
VIRGINIA GARDENS, FL 33166

## New Mailing Address:

FEI Number: 87-0768493      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MUGUERZA, ANGEL  
3911 SW 67 AVE  
MIAMI, FL 33155      US

## Name and Address of New Registered Agent:

RIZO, DAYAMI  
6555 NW 36 STREET  
117  
VIRGINIA GARDENS, FL 33166      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: DAYAMI RIZO

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BLANCO, JUAN O  
Address: 3530 SW 87 AVE  
City-St-Zip: MIAMI, FL 33165

Title: VP ( ) Delete  
Name: MARZO, DARLIN  
Address: 1321 SW 92 AVENUE  
City-St-Zip: MIAMI, FL 33174

Title: P ( ) Delete  
Name: MUGUERZA, ANGEL  
Address: 3911 SW 67 AVE  
City-St-Zip: MIAMI, FL 33155

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change ( ) Addition  
Name: RIZO, DAYAMI  
Address: 6555 NW 36 STREET, #117  
City-St-Zip: VIRGINIA GARDENS, FL 33166

Title: S ( ) Change (X) Addition  
Name: MUGUERZA, ANGEL  
Address: 3911 SW 67 AVENUE  
City-St-Zip: MIAMI, FL 33155

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: DAYAMI RIZO

PD

02/04/2009

Electronic Signature of Signing Officer or Director

Date