

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000051767

FILED
Apr 07, 2012
Secretary of State

Entity Name: T & A HOME HEALTH CARE, INC.

Current Principal Place of Business:

3939 NW 7TH ST
SUITE 205
MIAMI, FL 33126

New Principal Place of Business:

3939 NW 7TH ST
SUITE 205
MIAMI, FL 33126 US

Current Mailing Address:

3939 NW 7TH ST
SUITE 205
MIAMI, FL 33126

New Mailing Address:

3939 NW 7TH ST
SUITE 205
MIAMI, FL 33126 US

FEI Number: 03-0586415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEMAN, ODALYS
3939 NW 7TH ST STE 205
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

ALEMAN, ODALYS
3860 W 11TH LN
HIALEAH, FL 33012 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: ODALYS ALEMAN

04/07/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ALEMAN, ODALYS
Address: 3860 W 11TH LN
City-St-Zip: HIALEAH, FL 33012

Title: VP
Name: VALLE, GEORGINA
Address: 3939 NW 7TH ST STE 205
City-St-Zip: MIAMI, FL 33126 US

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: ODALYS ALEMAN

P

04/07/2012

Electronic Signature of Signing Officer or Director

Date