

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077016

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: NEVER ALONE SENIOR CARE, INC.

**Current Principal Place of Business:**

925 HUNTING LODGE DR  
MIAMI SPRINGS, FL 33166

**New Principal Place of Business:**

11865 SW 185 ST  
MIAMI, FL 33177

**Current Mailing Address:**

925 HUNTING LODGE DR  
MIAMI SPRINGS, FL 33166

**New Mailing Address:**

11865 SW 185 ST  
MIAMI, FL 33177

FEI Number: 20-8361826

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RELOBA, GUSTAVO E  
310 SW 119 AVENUE  
MIAMI, FL 33184 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: PSTD ( ) Delete  
Name: RELOBA, GUSTAVO E  
Address: 310 SW 119 AVENUE  
City-St-Zip: MIAMI, FL 33184

**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: GUSTAVO E RELOBA

PSTD

04/30/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date