## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000089309

Entity Name: P&THOME CARE INC.

FILED Mar 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6380 NW 25TH COURT SUNRISE, FL 33313

Current Mailing Address: New Mailing Address:

6380 NW 25TH COURT SUNRISE, FL 33313

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MILLWOOD, ZEPHANIA BROWN, DAHLIA 9370 NW 42 CT 4012 NW 90 AVE

SUNRISE, FL 33351 US SUNRISE, FL 33351 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: DAHLIA BROWN 03/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: MILLWOOD, ZEPHANIA Name: BROWN, DAHLIA

 Name:
 MILLWOOD, ZEPHANIA
 Name:
 BROWN, DAHLIA

 Address:
 9370 NW 42 CT
 Address:
 4012 NW 90 AVE

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33351

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: MILLWOOD, OPAL J Name: CHRISTIE, MARLON F

 Name:
 MILLWOOD, OPAL J
 Name:
 CHRISTIE, MARLON F

 Address:
 9370 NW 42 CT
 Address:
 670 SW 28 TER

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33311

Title: SEC ( ) Delete Title: ( ) Change ( ) Addition Name: MILLWOOD, YOLANDA Y Name:

 Name:
 MILLWOOD, YOLANDA Y
 Name:

 Address:
 9370 NW 42 CT
 Address:

 City-St-Zip:
 SUNRISE, FL 33351
 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: DAHLIA BROWN P 03/26/2007