

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000102682

FILED  
May 17, 2007  
Secretary of State

Entity Name: HOME CARE HEALTH CORPORATION

## Current Principal Place of Business:

13727 SW 152 ST  
119  
MIAMI, FL 33177

## New Principal Place of Business:

## Current Mailing Address:

13727 SW 152 ST  
119  
MIAMI, FL 33177

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

FERNANDEZ, JUAN D  
13727 SW 152 ST  
119  
MIAMI, FL 33177 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FERNANDEZ, JUAN D  
Address: 13727 SW 152 ST 119  
City-St-Zip: MIAMI, FL 33177

Title: VP ( ) Delete  
Name: EVELYN, MARCIAL M  
Address: 7335 SW 36 ST  
City-St-Zip: MIAMI, FL 33155

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: ARRIETA, EDITH R  
Address: 13727 SW 152 ST 119  
City-St-Zip: MIAMI, FL 33177

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: JUAN D FERNANDEZ

P

05/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date