

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000126184

Entity Name: ARR HOME HEALTH INC

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

10040 NW 9 STREET CIRCLE
205
MIAMI, FL 33172 US

New Principal Place of Business:

230 NW 132 CT
MIAMI, FL 33182 US

Current Mailing Address:

10040 NW 9 STREET CIRCLE
205
MIAMI, FL 33172 US

New Mailing Address:

230 NW 132 CT
MIAMI, FL 33182 US

FEI Number: 20-5661069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, ANGEL F
10040 NW 9 STREET CIRCLE
APT 205
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

MARTINEZ, ANGEL F
230 NW 132 CT
MIAMI, FL 33182 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: ANGEL MARTINEZ

03/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINEZ, ANGEL F
Address: 10040 NW 9 STREET CIRCLE - APT 205
City-St-Zip: MIAMI, FL 33172 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARTINEZ, ANGEL F
Address: 230 NW 132 CT
City-St-Zip: MIAMI, FL 33182 US

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: ANGEL MARTINEZ

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03/17/2009

Electronic Signature of Signing Officer or Director

Date