

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000138516

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Entity Name:** CARING FOR HEALTH HOME CARE, INC

**Current Principal Place of Business:**

3408 W 84 ST  
315  
HIALEAH, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

3408 W 84 ST  
315  
HIALEAH, FL 33018

**New Mailing Address:**

**FEI Number:** 20-5812584      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SAN JORGE, PEDRO  
7840 NW 163 ST  
MIAMI LAKES, FL 33016      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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SAN JORGE, PEDRO  
Address: 7840 NW 163 ST  
City-St-Zip: MIAMI LAKES, FL 33016

Title: VP  
Name: SAN JORGE, LISET  
Address: 7840 NW 163 ST  
City-St-Zip: MIAMI LAKES, FL 33016

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: PEDRO SAN JORGE

P

03/29/2012

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

\_\_\_\_\_ Date