## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000143793

City-St-Zip:

MIAMI, FL 33196

Entity Name: EXPERT QUALITY HOME HEALTH CONSULTING, INC.

FILED Apr 12, 2007 Secretary of State

Current Principal Place of Business				New Principal Place of Business:		
Current Principal Place of Business:				New Principal Place	or Business:	
8550 SW 109 AVENUE #121 MIAMI, FL 33173				12926 SW 133 COUR SUITE D MIAMI, FL 33186	₹T	
Current Mailing Address:				New Mailing Address:		
8550 SW 109 AVENUE #121 MIAMI, FL 33173				9963 SW 147 COURT MIAMI, FL 33196		
FEI Number	: 13-4348527	FEI Number Applied For ( )	FEI Nun	nber Not Applicable()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
TRUTT, M 9963 SW 1 MIAMI, FL						
	named entity e of Florida.	submits this statement for the p	ourpose o	f changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:					
Electronic Signature of Registered Agent					Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( RIVERO, MARI 8550 SW 109 / MIAMI, FL 331	AVENUE #121		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( TRUTT, MARG. 9963 SW 147 MIAMI, FL 331	СТ		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	CFO ( TRUTT, MICHA 9963 SW 147			Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: MICHAEL C. TRUTT CFO 04/12/2007