

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144900

FILED
Mar 31, 2009
Secretary of State

Entity Name: ABSOLUTE HOME HEALTH, INC

Current Principal Place of Business:

9240 SW 72 ST
103
MIAMI, FL 33173

New Principal Place of Business:

9240 SW 72ND ST
103
MIAMI, FL 33173

Current Mailing Address:

9240 SW 72 ST
103
MIAMI, FL 33173

New Mailing Address:

9240 SW 72ND ST
103
MIAMI, FL 33173

FEI Number: 20-5906208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, TAIMI
14436 SW 46 TER
MIAMI, FL 33175 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARCIA, TAIMI
Address: 14436 SW 46 TER
City-St-Zip: MIAMI, FL 33175

Title: VP (X) Delete
Name: SOSA, JORGE L
Address: 14436 SW 46 TER
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: TAIMI GARCIA

P

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date