

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000009522

Entity Name: ELIA'S HOME CARE INC

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

5600 S.W. 7TH STREET
MIAMI, FL 33134

New Principal Place of Business:

5600 S.W. 7TH STREET
CORAL GABLES, FL 33134

Current Mailing Address:

5600 S.W. 7TH STREET
MIAMI, FL 33134

New Mailing Address:

5600 S.W. 7TH STREET
CORAL GABLES, FL 33134

FEI Number: 20-8258949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORA, ARIEL
714 NW 128TH COURT
MIAMI, FL 33182 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: PD () Delete
Name: MORA, ARIEL
Address: 5600 S.W. 7TH STREET
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MORA, ARIEL
Address: 5600 S.W. 7TH STREET
City-St-Zip: CORAL GABLES, FL 33134

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: ARIEL MORA

PD

01/07/2008

Electronic Signature of Signing Officer or Director

Date