

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000014080

FILED  
Jan 15, 2010  
Secretary of State

**Entity Name:** VALES NURSING SERVICES, INC.

**Current Principal Place of Business:**

720 SW 10 ST # 5  
MIAMI, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

720 SW 10 ST # 5  
MIAMI, FL 33030

**New Mailing Address:**

FEI Number: 20-8367197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VALES, MANUEL L  
720 SW 10 ST # 5  
MIAMI, FL 33030 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  
Name: VALES, MANUEL L  
Address: 720 SW 10 ST # 5  
City-St-Zip: MIAMI, FL 33030

Title: VS  
Name: PILOTO, CARIDAD  
Address: 720 SW 10 ST # 5  
City-St-Zip: MIAMI, FL 33030

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: MANUEL L VALES

P

01/15/2010

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

\_\_\_\_\_ Date