

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000023137

FILED
Mar 11, 2010
Secretary of State

Entity Name: NIGHTINGALE HOME HEALTH CARE OF MIAMI INC

Current Principal Place of Business:

4471 NW 36TH STREET
SUITE # 212
MIAMI SPRINGS, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

4471 NW 36TH STREET
SUITE # 212
MIAMI SPRINGS, FL 33166 US

New Mailing Address:

FEI Number: 20-8486522 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BRUNET, JULIO
4471 NW 36TH STREET
SUITE # 212
MIAMI SPRINGS, FL 33166 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: PVTD
Name: BRUNET, JULIO
Address: 4471 NW 36TH STREET # 212
City-St-Zip: MIAMI SPRINGS, FL 33166 US

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: JULIO BRUNET

PRES

03/11/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date