

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000031592

FILED
Jan 13, 2009
Secretary of State

Entity Name: JARE HOME HEALTH SERVICES INC.

Current Principal Place of Business:

2200 SW 16 ST
STE 210
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

2200 SW 16 ST
STE 210
MIAMI, FL 33145

New Mailing Address:

FEI Number: 20-8496592 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PERAZA, LISSETTE
1725 SW 17 STREET
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

PERAZA, LISSETTE
1725 SW 17 STREET
MIAMI, FL 33145 US

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: LISSETTE PERAZA

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERAZA, LISSETTE
Address: 2200 SW 16 ST - STE 210
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PERAZA, LISSETTE
Address: 2200 SW 16 ST - STE 210
City-St-Zip: MIAMI, FL 33145

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: LISSETTE PERAZA

OWNE

01/13/2009

Electronic Signature of Signing Officer or Director

Date