

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000048883

FILED
May 29, 2009
Secretary of State

Entity Name: BEYOND HOME HEALTH CARE INC

Current Principal Place of Business:

9085 S.W. 87 AV
SUITE 208
MIAMI, FL 33176

New Principal Place of Business:

New Mailing Address:

9085 S.W. 87 AV
SUITE 208
MIAMI, FL 33176

Current Mailing Address:

8770 SW 72ND ST
MIAMI, FL 33173

FEI Number: 56-2656520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAYLE, MONICA
6705 SW 94 AV
MIAMI, FL 33173 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GAYLE, MONICA
Address: 8770 SW 72ND ST
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GAYLE, MONICA
Address: 6705 S.W.94 AVE
City-St-Zip: MIAMI, FL 33173

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: MONICA GAYLE

P

05/29/2009

Electronic Signature of Signing Officer or Director

Date