

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000065122

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: PRIMO HOME CARE SOLUTIONS, INC.

## Current Principal Place of Business:

3550 BISCAYNE BOULEVARD  
SUITE 408  
MIAMI, FL 33137

## New Principal Place of Business:

## Current Mailing Address:

3550 BISCAYNE BOULEVARD  
SUITE 408  
MIAMI, FL 33137

## New Mailing Address:

FEI Number: 26-0303767      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KIM, PHILIP  
3550 BISCAYNE BOULEVARD  
SUITE 408  
MIAMI, FL 33137 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 ( ) Delete  
Name: KIM, PHILIP  
Address: 1370 WASHINGTON AVENUE, SUITE 312  
City-St-Zip: MIAMI BEACH, FL 33139

Title: CEO ( ) Delete  
Name: PENSKY, JASON  
Address: 1370 WASHINGTON AVENUE, SUITE 312  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KIM, PHILIP  
Address: 3550 BISCAYNE BOULEVARD, SUITE 408  
City-St-Zip: MIAMI, FL 33137

Title: CEO (X) Change ( ) Addition  
Name: PENSKY, JASON  
Address: 3550 BISCAYNE BOULEVARD, SUITE 408  
City-St-Zip: MIAMI, FL 33137

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: PHILIP KIM

P

01/08/2008

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

\_\_\_\_\_  
Date