

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000065307

FILED
Mar 08, 2008
Secretary of State**Entity Name:** FERREIRO SENIOR CARE, INC**Current Principal Place of Business:**15492 SW 61 LN
MIAMI, FL 33193**New Principal Place of Business:**15942 SW 61 LN
MIAMI, FL 33193**Current Mailing Address:**15492 SW 61 LN
MIAMI, FL 33193**New Mailing Address:**15942 SW 61 LN
MIAMI, FL 33193**FEI Number:** 26-0484481**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BUSUTIL, JAVIER
15492 SW 61 LN
MIAMI, FL 33193 US**Name and Address of New Registered Agent:**BUSUTIL, JAVIER
15942 SW 61 LN
MIAMI, FL 33193 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: JAVIER BUSUTIL

03/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DP () Delete
Name: BUSUTIL, JAVIER
Address: 15492 SW 61 LN
City-St-Zip: MIAMI, FL 33193**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DP (X) Change () Addition
Name: BUSUTIL, JAVIER
Address: 15942 SW 61 LN
City-St-Zip: MIAMI, FL 33193

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: JAVIER BUSUTIL

PD

03/08/2008

Electronic Signature of Signing Officer or Director

Date