

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076586

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: JIBS HOME CARE & TRAINING SERVICES, INC.

## Current Principal Place of Business:

20505 N.W. 25TH COURT  
MIAMI GARDENS, FL 33056 US

## New Principal Place of Business:

99 NW 183 ST  
SUITE 117A  
MIAMI GARDENS, FL 33169 US

## Current Mailing Address:

20505 N.W. 25TH COURT  
MIAMI GARDENS, FL 33056 US

## New Mailing Address:

P.O.BOX 610834  
NORTH MIAMI, FL 33261 US

FEI Number: 26-0289955

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PINDER, ASHOMY R  
20505 N.W. 25TH COURT  
MIAMI GARDENS, FL 33056 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: PINDER, ASHOMY R  
Address: 20505 NW 25 COURT  
City-St-Zip: MIAMI GARDENS, FL 33056 US

Title: CEO ( ) Delete  
Name: SEIDE-BALTHAZAR, IMENE  
Address: 20505 NW 25 COURT  
City-St-Zip: MIAMI GARDENS, FL 33056 US

Title: VP ( ) Delete  
Name: PINDER-SEIDE, HARTLEY  
Address: 20505 NW 25 COURT  
City-St-Zip: MIAMI GARDENS, FL 33056 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEC ( ) Change (X) Addition  
Name: PINDER, MARANGELY  
Address: 20505 NW 25 COURT  
City-St-Zip: MIAMI, FL 33056

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: ASHOMY PINDER

P

03/26/2009

Electronic Signature of Signing Officer or Director

Date