

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087308

Entity Name: DIVINE HOME HEALTH CARE, INC

FILED  
Jan 12, 2011  
Secretary of State

## Current Principal Place of Business:

5519 HANLEY RD.  
B  
TAMPA, FL 33634 US

## Current Mailing Address:

5519 HANLEY RD.  
B  
TAMPA, FL 33634 US

## New Principal Place of Business:

6107 MEMORIAL HWY  
D  
TAMPA, FL 33615 US

## New Mailing Address:

6107 MEMORIAL HWY  
D  
TAMPA, FL 33615 US

FEI Number: 26-0712208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

RIOS, GELYS L  
6709 LARIMER DRIVE  
TAMPA, FL 33615 US

## Name and Address of New Registered Agent:

GONGORA, GELYS L  
6709 LARIMER DRIVE  
TAMPA, FL 33615 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: GELYS GONGORA

01/12/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: CORDOVI, JULIO C  
Address: 6709 LARIMER DRIVE  
City-St-Zip: TAMPA, FL 33615

Title: D  
Name: RIOS, GELYS L  
Address: 6709 LARIMER DRIVE  
City-St-Zip: TAMPA, FL 33615

I hereby 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 all other like empowered.

SIGNATURE: GELYS GONGORA

DON

01/12/2011

Electronic Signature of Signing Officer or Director

Date