

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000088080

FILED
May 23, 2008
Secretary of State

Entity Name: LIFE HOME HEALTH SERVICES INC

Current Principal Place of Business:

12762 SW 88TH ST.
SUITE C
MIAMI, FL 33186

New Principal Place of Business:

10511 N KENDALL DR
SUITE C-204
MIAMI, FL 33176

Current Mailing Address:

12762 SW 88TH ST.
SUITE C
MIAMI, FL 33186

New Mailing Address:

10511 N KENDALL DR
SUITE C-204
MIAMI, FL 33176

FEI Number: 42-1739315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARCENCIBIA, YANICEL
12762 SW 88TH ST.
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

ARCENCIBIA, YANICEL
10511 N KENDALL DR
SUITE C-204
MIAMI, FL 33176 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:

05/23/2008

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: PD () Delete
Name: ARENCIBIA, YANICEL
Address: 12762 SW 88TH ST.
City-St-Zip: MIAMI, FL 33186

Title: VD () Delete
Name: DIAZ, DELFIN
Address: 12762 SW 88TH ST.
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARENCIBIA, YANICEL
Address: 10511 N KENDALL DR SUITE C-204
City-St-Zip: MIAMI, FL 33176

Title: VD (X) Change () Addition
Name: DIAZ, DELFIN
Address: 10511 N KENDALL DR SUITE C-204
City-St-Zip: MIAMI, FL 33176

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: YANICEL ARENCIBIA

P

05/23/2008

Electronic Signature of Signing Officer or Director

Date