## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000088080

Entity Name: LIFE HOME HEALTH SERVICES INC

FILED May 23, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12762 SW 88TH ST. 10511 N KENDALL DR SUITE C-204 SUITE C MIAMI, FL 33186 MIAMI, FL 33176

**Current Mailing Address: New Mailing Address:** 

12762 SW 88TH ST. 10511 N KENDALL DR SUITE C SUITE C-204 MIAMI, FL 33186 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: Name and Address of New Registered Agent:

ARCENCIBIA, YANICEL ARCENCIBIA, YANICEL 12762 SW 88TH ST. 10511 N KENDALL DR MIAMI, FL 33176 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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition ARENCIBIA, YANICEL ARENCIBIA, YANICEL Name: Name: 12762 SW 88TH ST. 10511 N KENDALL DR SUITE C-204 Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33176

Title: VD Title: VD () Delete (X) Change ( ) Addition

DIAZ, DELFIN Name: Name: DIAZ. DELFIN

12762 SW 88TH ST. Address: 10511 N KENDALL DR SUITE C-204 Address:

MIAMI, FL 33186 MIAMI, FL 33176 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: YANICEL ARENCIBIA 05/23/2008