

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000094027

Entity Name: HOME HEALTH R'US, INC.

FILED  
Apr 11, 2011  
Secretary of State

**Current Principal Place of Business:**

13190 SW 134TH STREET  
SUITE 105  
MIAMI, FL 33186

**New Principal Place of Business:**

13501 SW 136TH STREET  
SUITE 201  
MIAMI, FL 33186

**Current Mailing Address:**

13190 SW 134TH STREET  
SUITE 105  
MIAMI, FL 33186

**New Mailing Address:**

13501 SW 136TH STREET  
SUITE 201  
MIAMI, FL 33186

FEI Number: 26-0760253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GONZALEZ, FABIAN A  
13190 SW 134TH STREET  
SUITE 105  
MIAMI, FL 33186 US

**Name and Address of New Registered Agent:**

GONZALEZ, FABIAN A  
13501 SW 136TH STREET  
SUITE 201  
MIAMI, FL 33186 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/11/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GONZALEZ, FABIAN A  
Address: 13501 SW 136TH STREET SUITE 201  
City-St-Zip: MIAMI, FL 33186

Title: D  
Name: SUAREZ, GONZALO  
Address: 13501 SW 136TH STREET SUITE 201  
City-St-Zip: MIAMI, FL 33186

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: FABIAN GONZALEZ

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

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04/11/2011

\_\_\_\_\_  
Date