P07000106833

(Requestor's Name)		
(Address)		
(Address)		
(Ci	ity/State/Zip/Phone) #)
PICK-UP	, WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
<i>,</i>	•	
		.
·		
	·	





500182142185

AC 6/17/10

Malave, Erin

107000106833

From:

liliana corsili [longevity18@bellsouth.net]

Sent:

Tuesday, June 15, 2010 4:41 PM

To:

CorpAddressChange

Subject: Change of address

Name of Corporation:

Longevity Home Health Care, Inc

FEI/EIN# 450573948

Please change principal address and mailing address to read:

13384 SW 128th. Street Miami, Florida 33186 305-251-7084 305-251-7085 Fax

Thank you,

Pedro Gonzalez Administrator