2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 22, 2008
Secretary of State

DOCUMENT# P07000115313

Entity Name: ORION HOME HEALTH CARE, CORP.

Current Principal Place of Business:

6860 SW 15 ST
MIAMI, FL 33144 US

New Principal Place of Business:

175 FOUNTAINEBLEAU BLVD.
1N2
MIAMI, FL 33172 US

Current Mailing Address:

6860 SW 15 ST
MIAMI, FL 33144 US

New Mailing Address:

175 FOUNTAINEBLEAU BLVD.
1N2
MIAMI, FL 33172 US

FEI Number: 26-1268360 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BENITEZ ALONSO, JORGE
6860 SW 15 ST
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

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 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: P ( ) Delete
Name: BENITEZ ALONSO, JORGE
Address: 6860 SW 15 ST
City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
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.

SIGNATURE: JORGE BENITEZ ALONSO PRES 08/22/2008

Electronic Signature of Signing Officer or Director Date