2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# P07000116018

Entity Name: CARE 4U HOME HEALTH AGENCY INC

Current Principal Place of Business:

2125 VICTORIA AVE
3
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

2125 VICTORIA AVE
3
FORT MYERS, FL 33901 US

New Mailing Address:

FEI Number: 26-1289643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DELGADO-ALVAREZ, JAZARO
3829 SW 17 AVE
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

DELGADO-ALVAREZ, LAZARO
3829 SW 17 AVE
CAPE CORAL, FL 33914 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: LAZARO DELGADO ALVAREZ 02/19/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ADM ( ) Delete
Name: DELGADO ALVAREZ, LAZARO
Address: 3829 SW 17 AVE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: VP ( ) Delete
Name: RAYA, EDUARDO
Address: 1030 NW 37 PL
City-St-Zip: CAPE CORAL, FL 33993 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: RAYA, EDUARDO
Address: 1030 NW 37 PL
City-St-Zip: CAPE CORAL, FL 33993 US

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: LAZARO DELGADO ALVAREZ ADM 02/19/2009
Electronic Signature of Signing Officer or Director Date