

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000119006

FILED
Jan 24, 2009
Secretary of State

Entity Name: HOME HEALTH SERVICES, CORP

Current Principal Place of Business:

16914 NW 89 CT
MIAMI LAKES, FL 33018

New Principal Place of Business:

5881 NW 151 ST
SUITE #115
MIAMI LAKES, FL 33014

Current Mailing Address:

16914 NW 89 CT
MIAMI LAKES, FL 33018

New Mailing Address:

5881 NW 151 ST
SUITE #115
MIAMI LAKES, FL 33014

FEI Number: 42-1744461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTES DE OCA, YANIO A P
16914 NW 89 CT
MIAMI LAKES, FL 33018 US

Name and Address of New Registered Agent:

MONTES DE OCA, YANIO A P
5881 NW 151 ST
SUITE # 115
MIAMI LAKES, FL 33014 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: YANIO A MONTES DE OCA

01/24/2009

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: MONTES DE OCA, YANIO A P
Address: 16914 NW 89 CT
City-St-Zip: MIAMI LAKES, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MONTES DE OCA, YANIO A P
Address: 5881 NW 151 ST SUITE 115
City-St-Zip: MIAMI LAKES, FL 33014

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: YANIO A MONTES DE OCA

P

01/24/2009

Electronic Signature of Signing Officer or Director

Date