2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000123491

Entity Name: AMERICARCARE, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

1740 NE 35TH AVE 777 NW 72 AVENUE HOMESTEAD, FL 33033 3148

MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

9143 SW 77 AVENUE 1740 NE 35TH AVE

HOMESTEAD, FL 33033 B-403

MIAMI, FL 33156

FEI Number: 41-2258439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CIVIL TRIAL PRACTICE, P.A. 152 NE 167TH STREET

SUITE 300 MIAMI, FL 33162 US 9143 SW 77 AVENUE B-403 MIAMI, FL 33156 US

ARMENTEROS, LAZARO MR.

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 ARMENTEROS 04/29/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ARMENTEROS, LAZARO ARMENTEROS, LAZARO Name: Name: 1740 NE 35TH AVE 9143 SW 77 AVE B-403 Address: Address: City-St-Zip:

HOMESTEAD, FL 33033 City-St-Zip: MIAMI, FL 33156

Title: () Delete Title: () Change (X) Addition Name: Name: BREANINGER, MARK MR. 777 NW 72 AVENUE #3148 Address: Address:

MIAMI, FL 33126 City-St-Zip: City-St-Zip:

() Change (X) Addition Title: Title: () Delete COO

Name: PAINTER, JOHN MR. Name: 777 NW 72 AVENUE #3148 Address Address: City-St-Zip: City-St-Zip: MAIMI, FL 33126

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: MARK BREANINGER 04/29/2008 CFO