

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000123491

Entity Name: AMERICARCARE, INC.

FILED
Oct 19, 2009
Secretary of State

Current Principal Place of Business:

11767 S DIXIE HWY STE 367
MIAMI, FL 33156

New Principal Place of Business:

11767 S DIXIE HWY
STE 367
MIAMI, FL 33156

Current Mailing Address:

9143 SW 77 AVENUE
B-403
MIAMI, FL 33156

New Mailing Address:

125 N. 2ND ST
#110-551
PHOENIX, AZ 85004

FEI Number: 41-2258439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMENTEROS, LAZARO MR.
9143 SW 77 AVENUE
B-403
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

ARMENTEROS, LAZARO A MR
11767 S DIXIE HWY
STE 367
MIAMI, FL 33156 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 ARMENTEROS

10/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARMENTEROS, LAZARO
Address: 9143 SW 77 AVE B-403
City-St-Zip: MIAMI, FL 33156

Title: CFO () Delete
Name: BREANINGER, MARK MR.
Address: 777 NW 72 AVENUE #3148
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGR (X) Change () Addition
Name: ARMENTEROS, LAZARO A MR
Address: 11767 S DIXIE HWY STE 367
City-St-Zip: MIAMI, FL 33156

Title: MGR (X) Change () Addition
Name: BREANINGER, MARK A MR
Address: 125 N. 2ND STREET #110-551
City-St-Zip: PHOENIX, AZ 85004

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

MGR

10/19/2009

Electronic Signature of Signing Officer or Director

Date