

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000123873

Entity Name: HOME CARE TEAM USA INC

FILED  
Oct 25, 2008  
Secretary of State

## Current Principal Place of Business:

14461 SW 83 STREET  
MIAMI, FL 33183

## New Principal Place of Business:

## Current Mailing Address:

14461 SW 83 STREET  
MIAMI, FL 33183

## New Mailing Address:

FEI Number: 26-1462202

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VEGA, ROBERT O  
14461 SW 83 STREET  
MIAMI, FL 33183 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: ROBERT O VEGA

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: VEGA, ROBERT O  
Address: 14461 SW 83 STREET  
City-St-Zip: MIAMI, FL 33183

Title: VP ( ) Delete  
Name: RYAN, GREG  
Address: 22509 DOLOROSA STREET  
City-St-Zip: WOODLAND HILLS, CA 91367

Title: VP ( ) Delete  
Name: KEAN, SHARON  
Address: 40091 98TH ST WEST  
City-St-Zip: LEONA VALLEY, CA 93551

Title: VP ( ) Delete  
Name: MANIS, PATRICK V  
Address: 4007 WINTERWOOD COURT  
City-St-Zip: MOONPARK, CA 93021

Title: VP ( ) Delete  
Name: RIVAS, CLARA E  
Address: 8875 NW 23 STREET  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ROBERT O VEGA

P

10/25/2008

Electronic Signature of Signing Officer or Director

Date