

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000008748

FILED  
Mar 04, 2009  
Secretary of State

Entity Name: TRUE HEALTHLINE HOME CARE CORP

## Current Principal Place of Business:

10337 SW 156 AVE  
MIAMI, FL 33196 US

## New Principal Place of Business:

14221 SW 120 ST  
102  
MIAMI, FL 33186

## Current Mailing Address:

10337 SW 156 AVE  
MIAMI, FL 33196 US

## New Mailing Address:

14221 SW 120 ST  
102  
MIAMI, FL 33186

FEI Number: 26-1825683

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARCIA, RENE R  
10337 SW 156 AVE  
MIAMI, FL 33196 US

## Name and Address of New Registered Agent:

PADILLA, GERMAN  
14221 SW 120 ST  
102  
MIAMI, FL 33186 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: GERMAN PADILLA

03/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GARCIA, RENE R  
Address: 10337 SW 156 AVE  
City-St-Zip: MIAMI, FL 33196

Title: VP ( ) Delete  
Name: PADILLA, GERMAN  
Address: 10337 SW 156 AVE  
City-St-Zip: MIAMI, FL 33196

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PADILLA, GERMAN  
Address: 14221 SW 120 ST SUITE 102  
City-St-Zip: MIAMI, FL 33186

Title: VP (X) Change ( ) Addition  
Name: PADILLA, GERMAN  
Address: 14221 SW 120 ST  
City-St-Zip: MIAMI, FL 33186

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: GERMAN PADILLA

P

03/04/2009

Electronic Signature of Signing Officer or Director

Date