

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000038753

FILED
Mar 03, 2009
Secretary of State

Entity Name: YCM HOME HEALTH CARE INC

Current Principal Place of Business:

13741 SW 49 CT
MIRAMAR, FL 33027 US

New Principal Place of Business:

15291 NW 60 AV
110
MIAMI LAKES, FL 33014 US

Current Mailing Address:

13741 SW 49 CT
MIRAMAR, FL 33027 US

New Mailing Address:

15291 NW 60 AV
110
MIAMI LAKES, FL 33014 US

FEI Number: 26-2424989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, CRISLAYNE
13741 SW 49 CT
MIAMI, FL 33027 US

Name and Address of New Registered Agent:

ABRAHAM, CRISLAYNE
15291 NW 60 AV
110
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: CRISLAYNE ABRAHAM

03/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ABRAHAM, CRISLAYNE
Address: 13741 SW 49 CT
City-St-Zip: MIRAMAR, FL 33027 US

Title: S T (X) Delete
Name: FERNANDEZ, YURINA
Address: 7016 W 29 AVENUE
City-St-Zip: HIALEAH, FL 33018 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ABRAHAM, CRISLAYNE
Address: 15291 NW 60 AV SUITE #110
City-St-Zip: MIAMI LAKES, FL 33014 US

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: CRISLAYNE ABRAHAM

P

03/03/2009

Electronic Signature of Signing Officer or Director

Date