

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000042257

FILED
Apr 02, 2009
Secretary of State

Entity Name: ANGEL'S HOME CARE AGENCY, INC.

Current Principal Place of Business:

3600 S. STATE ROAD 7 (441)
SUITE 307
MIRAMAR, FL 33023

New Principal Place of Business:

3600 SOUTH STATE ROAD 7
SUITE 307
MIRAMAR, FL 33023

Current Mailing Address:

3600 S. STATE ROAD 7 (441)
SUITE 307
MIRAMAR, FL 33023

New Mailing Address:

3600 SOUTH STATE ROAD 7
SUITE 307
MIRAMAR, FL 33023

FEI Number: 26-2488636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SAN JUAN, NORMA
8553 SHERATON DR.
MIRAMAR, FL 33025 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SAN JUAN, NORMA
Address: 8553 SHERATON DR
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NORMA SAN JUAN

P

04/02/2009

Electronic Signature of Signing Officer or Director

Date