

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000102654

**FILED**  
**Feb 03, 2009**  
**Secretary of State**

**Entity Name:** URR A HOME HEALTH, CORP.

**Current Principal Place of Business:**

3010 SW 102 PL  
MIAMI, FL 33165

**New Principal Place of Business:**

9766 SW 24 ST  
SUITE # 17  
MIAMI, FL 33165

**Current Mailing Address:**

3010 SW 102 PL  
MIAMI, FL 33165

**New Mailing Address:**

9766 SW 24 ST  
SUITE # 17  
MIAMI, FL 33165

**FEI Number:** 26-4031074

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

URRA LOPEZ, JORGE M  
3010 SW 102 PL  
MIAMI, FL 33165 US

**Name and Address of New Registered Agent:**

URRA LOPEZ, JORGE M  
9766 SW 24 ST  
SUITE # 17  
MIAMI, FL 33165 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:** JORGE M URR A LOPEZ

02/03/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** URR A LOPEZ, JORGE M  
**Address:** 3010 SW 102 PL  
**City-St-Zip:** MIAMI, FL 33165

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** P (X) Change ( ) Addition  
**Name:** URR A LOPEZ, JORGE M  
**Address:** 9766 SW 24 ST SUITE # 17  
**City-St-Zip:** MIAMI, FL 33165

**Title:** VP ( ) Change (X) Addition  
**Name:** LOPEZ, LIUSVA  
**Address:** 9766 SW 24 ST SUITE # 17  
**City-St-Zip:** MIAMI, FL 33165

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:** JORGE M URR A LOPEZ

P

02/03/2009

Electronic Signature of Signing Officer or Director

Date