

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000000886

Entity Name: AM LOVING CARE INC.

FILED
Apr 16, 2011
Secretary of State

Current Principal Place of Business:

113 PORTER PLACE
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

113 PORTER PLACE
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 26-0747142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NECENCE, AMIDE P
113 PORTER PLACE
WEST PALM BEACH, FL 33409 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

OFFICERS AND DIRECTORS:

Title: PD
Name: NECENCE, AMIDE P
Address: 113 PORTER PLACE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VD
Name: NONSANT, MARIE L
Address: 113 PORTER PLACE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S
Name: NECENCE, MARC
Address: 113 PORTER PLACE
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby 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 all other like empowered.

SIGNATURE: AMIDE P NECENCE

PD

04/16/2011

Electronic Signature of Signing Officer or Director

Date