

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000013105

FILED
Apr 11, 2012
Secretary of State

Entity Name: HEAVENLY TOUCH HOME HEALTH CARE CORP

Current Principal Place of Business:

8181 N.W. 36 ST SUITE 1905
DORAL, FL 33166

New Principal Place of Business:

3555 NW 79 AVE
SUITE 200
DORAL, FL 33122

Current Mailing Address:

8181 N.W. 36 ST SUITE 1905
DORAL, FL 33166

New Mailing Address:

3555 NW 79 AVE
SUITE 200
DORAL, FL 33122

FEI Number: 80-0355332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEJEDA, IBIS C
8181 N.W. 36 ST SUITE #1905
DORAL, FL 33166 US

Name and Address of New Registered Agent:

TEJEDA, IBIS C
3555 NW 79 AVE
SUITE 200
DORAL, FL 33122 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:

04/11/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MARTINEZ, MAYRA T
Address: 3555 NW 79 AVE SUITE 200
City-St-Zip: DORAL, FL 33122

Title: D
Name: ZAMBRANA, MARCELINA
Address: 3555 NW 79 AVE SUITE 200
City-St-Zip: DORAL, FL 33122

Title: VP
Name: TEJEDA, IBIS C
Address: 3555 NW 79 AVE SUITE 200
City-St-Zip: DORAL, FL 33166

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: MAYRA MARTINEZ

P

04/11/2012

Electronic Signature of Signing Officer or Director

Date