

2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P09000017674

FILED
Aug 16, 2012
Secretary of State

Entity Name: HOME HEALTH PROFESSIONAL SERVICES CORP.

Current Principal Place of Business:

2450 SOUTHWEST 137TH AVENUE, SUITE 209
MIAMI, FL 33175

New Principal Place of Business:

2450 SOUTHWEST 137TH AVENUE, SUITE 225
MIAMI, FL 33175 US

Current Mailing Address:

2450 SOUTHWEST 137TH AVENUE, SUITE 209
MIAMI, FL 33175

New Mailing Address:

2450 SOUTHWEST 137TH AVENUE, SUITE 225
MIAMI, FL 33175

FEI Number: 80-0357120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

LASA, EVELIO
2450 SW 137TH AVE SUITE 225
MIAMI, FL 33175 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: EVELIO LASA

08/16/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPS
Name: LASA, EVELIO
Address: 2450 SOUTHWEST 137TH AVENUE, SUITE 225
City-St-Zip: MIAMI, FL 33175

Title: V
Name: HONDAL, CRISTINA
Address: 2450 SOUTHWEST 137TH AVENUE, SUITE 225
City-St-Zip: MIAMI, FL 33175

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: EVELIO LASA

DPS

08/16/2012

Electronic Signature of Signing Officer or Director

Date