2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2010
Secretary of State

DOCUMENT# P09000041657

Entity Name: BETSA HOME HEALTH CARE, INC.

Current Principal Place of Business:

1802 NORTH ALAFAYA TRAIL
ORLANDO, FL 32826

New Principal Place of Business:

5334 CENTRAL FLORIDA PARKWAY STE 111
ORLANDO, FL 32821

Current Mailing Address:

1802 NORTH ALAFAYA TRAIL
ORLANDO, FL 32826

New Mailing Address:

5334 CENTRAL FLORIDA PARKWAY STE 111
ORLANDO, FL 32821

FEI Number: 27-0172406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARAY, RAWNY ESQ.
19 WEST FLAGLER STREET
SUITE 707
MIAMI, FL 33130 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D
Name: RAMIREZ, EMILIO
Address: 5334 CENTRAL FLORIDA PARKWAY STE 111
City-St-Zip: ORLANDO, FL 32821

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: EMILIO RAMIREZ PRES 05/01/2010

Electronic Signature of Signing Officer or Director — Date