

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000095951

FILED
Jan 19, 2011
Secretary of State

Entity Name: YANI UNLIMITED CARE PLUS CORPORATION

Current Principal Place of Business:

4747 W. WATERS AVE. #107
TAMPA, FL 33614

New Principal Place of Business:

4900 N MACDILL AVE
A-48
TAMPA, FL 33614

Current Mailing Address:

4747 W. WATERS AVE. #107
TAMPA, FL 33614

New Mailing Address:

4900 N MACDILL AVE
A-48
TAMPA, FL 33614

FEI Number: 27-0958383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OJEDA, YANARAT
4747 W. WATERS AVE. #107
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

OJEDA, YANARAT
4900 N MACDILL AVE
A-48
TAMPA, FL 33614 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: YANARAT OJEDA

01/19/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: OJEDA, YANARAT
Address: 4900 N MACDILL AVE # A-48
City-St-Zip: TAMPA, FL 33614

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: YANARAT OJEDA

PRES

01/19/2011

Electronic Signature of Signing Officer or Director

Date