

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000018089

FILED  
Mar 26, 2011  
Secretary of State

**Entity Name:** HOMECARE AND SERVICES UNLIMITED INC

**Current Principal Place of Business:**

12147 NW 7 AVE  
MIAMI, FL 33168

**New Principal Place of Business:**

**Current Mailing Address:**

12147 NW 7 AVE  
MIAMI, FL 33168

**New Mailing Address:**

FEI Number: 27-1999532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MADISON, DAVIE J  
9200 NW 12TH AVE.  
MIAMI, FL 33150 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: P  
Name: MADISON, DAVIE J  
Address: 9200 NW 12TH AVE  
City-St-Zip: MIAMI, FL 33150

Title: VP  
Name: WYCHE, FREEMAN T SR.  
Address: 1263 NW 67TH STREET  
City-St-Zip: MIAMI, FL 33147

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: DAVIE MADISON

P

03/26/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date