

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000082278

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** CHAMBER'S HAND OF CARE INC

**Current Principal Place of Business:**

11551 SW 30 ST  
103  
MIRAMAR, FL 33025

**New Principal Place of Business:**

7743 HAMPTON BLVD  
7743  
NORTH LAUDERDALE, FL 33068

**Current Mailing Address:**

11551 SW 30 ST  
103  
MIRAMAR, FL 33025

**New Mailing Address:**

7743 HAMPTON BLVD  
7743  
NORTH LAUDERDALE, FL 33068

**FEI Number:** 27-2536244

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAMBERS, GENTRY  
11551 SW 30ST  
103  
MIRAMAR, FL 33025 US

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

CHAMBERS, GENTRY  
7743 HAMPTON BLVD  
7743  
NORTH LAUDERDALE, FL 33068 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:

04/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: CHAMBERS, GENTRY  
Address: 7743 HAMPTON BLVD  
City-St-Zip: NORTH LAUDERDALE, FL 33068

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: GENTRY CHAMBERS

CEO

04/30/2011

Electronic Signature of Signing Officer or Director

Date