

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000046082

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** DEAR TO CARE INC.

**Current Principal Place of Business:**

8710 NW 57 LN  
TAMARAC, FL 33321

**New Principal Place of Business:**

8710 NW 57TH LN  
TAMARAC, FL 33321 US

**Current Mailing Address:**

8710 NW 57 LN  
TAMARAC, FL 33321

**New Mailing Address:**

8710 NW 57TH LN  
TAMARAC, FL 33321 US

**FEI Number:** 35-2411163

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAGPERSAD, LEELA  
8710 NW 57 LN.  
TAMARAC, FL 33321 US

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

JAGPERSAD, LEELA  
8710 NW 57TH LN  
TAMARAC, FL 33321 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: LEELA JAGPERSAD

05/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JAGPERSAD, LEELA  
Address: 8710 NW 57TH LN  
City-St-Zip: TAMARAC, FL 33321 US

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: LEELA JAGPERSAD

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date