2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

DOCUMENT# P11000062808

Entity Name: P.A.M. CARE INC.

Current Principal Place of Business:

2557 CABERNET CIRCLE
OCOEE, FL 34761 US

New Principal Place of Business:

5104 N ORANGE BLOSSOM TRAIL
224
ORLANDO, FL 32810 US

Current Mailing Address:

2557 CABERNET CIRCLE
OCOEE, FL 34761

New Mailing Address:

5104 N ORANGE BLOSSOM TRAIL
224
ORLANDO, FL 32810

FEI Number: 45-2762745 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURPHY, PAMELA N
2557 CABERNET CIRCLE
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

MURPHY, PAMELA N
5104 N ORANGE BLOSSOM TRAIL
224
ORLANDO, FL 32810 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: 04/27/2012

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: MURPHY, PAMELA N
Address: 5104 N ORANGE BLOSSOM TRAIL STE 224
City-St-Zip: ORLANDO, FL 32810 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: PAMELA MURPHY DIR 04/27/2012

Electronic Signature of Signing Officer or Director — Date