

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000055641

FILED  
Apr 01, 2010  
Secretary of State

Entity Name: M & D HOME HEALTH CARE, INC.

## Current Principal Place of Business:

1840 WEST 49 STREET  
SUITE 235  
HIALEAH, FL 33012

## New Principal Place of Business:

1840 WEST 49 STREET  
SUITE 309  
HIALEAH, FL 33012

## Current Mailing Address:

1840 WEST 49 STREET  
SUITE 235  
HIALEAH, FL 33012

## New Mailing Address:

1840 WEST 49 STREET  
SUITE 309  
HIALEAH, FL 33012

FEI Number: 65-0427642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LOPEZ, MERCEDES  
635 W 73RD PL  
HIALEAH, FL 33014 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD  
Name: OLIVA, FELIPE  
Address: 7180 W. 15TH CRT.  
City-St-Zip: HIALEAH, FL 33014

Title: VPD  
Name: LOPEZ, MERCEDES  
Address: 7180 W. 15TH CRT.  
City-St-Zip: HIALEAH, FL 33014

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: MERCEDES LOPEZ

VPD

04/01/2010

Electronic Signature of Signing Officer or Director

Date