2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004
Secretary of State

DOCUMENT# P93000056494

Entity Name: MIDWEST HOME HEALTH SERVICES, INC.

Current Principal Place of Business:

5365 W. ATLANTIC AVE
SUITE 503
DELRAY BEACH, FL 33484 US

New Principal Place of Business:

Current Mailing Address:

5365 W. ATLANTIC AVE
SUITE 503
DELRAY BEACH, FL 33484 US

New Mailing Address:

FEI Number: 65-0445100 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GUPTA, VIJAY K.
5365 W. ATLANTIC AVE.
SUITE 503
DELRAY BEACH, FL 33484

Name and Address of New Registered Agent:

GUPTA, VIJAY K
5365 W. ATLANTIC AVE.
SUITE 503
DELRAY BEACH, FL 33484

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: VIJAY K. GUPTA 02/23/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GUPTA, VIJAY K
Address: 5365 W. ATLANTIC AVE., SUITE 503
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VIJAY K. GUPTA D 02/23/2004
Electronic Signature of Signing Officer or Director Date