

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 AUG -8 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000072519 (0)

1. Corporation Name
ABSENTEE HOME CARE & MAINTENANCE, INC.

Principal Place of Business

2473 NW 66 DR
BOCA RATON FL 33496

Executive Office

2473 NW 66 DR
BOCA RATON FL 33496-2002

2. Principal Place of Business

21 State: FL
22 City & State

23 Zip

24 Country

2a. Principal Place of Business

26 State: FL
27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

BRODSKY, LINDA R
2473 NW 66 DR
BOCA RATON FL 33496

3. Date Incorporated or Qualified
10/13/1993

3a. Date of Last Report
05/01/1996

4. FET Number
65-0453742

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL 85 Zip Code

11. Pursuant to the provisions of the laws of the State of Florida, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as authorized by the Florida Statutes. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and agree to the provisions of Section 607.0405, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PSD	BRODSKY, LINDA R	2473 NW 66 DR	BOCA RATON FL 33496
VTD	BRODSKY, HERBERT G	2473 NW 66 DR	BOCA RATON FL 33496

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

14. I do hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation; and that I execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or 13 of this report.

CR2E034 (9/96)

ABSENTEE

HOME CARE

&

MAINTENANCE, INC.

Pg. 2

CERTIFIED, RETURN RECEIPT

July 20, 1997

Annual Reports Filings
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

BIN# 65-0453742

To Whom It May Concern:

I previously submitted my 1997 Corporate Annual Report (copy of original form attached) along with Check No. 3702 dated April 15 for \$165. **NOTHING WAS RECEIVED BY YOUR OFFICE AND MY CHECK WAS NOT CASHED!!!** We have since received three bank statements, none of which included the cancelled check.

I contacted Tallahassee on July 15 to find out why the check was not returned. Apparently, neither the form nor the check was received, and I was told to write to you to explain that I have a missing check and to appeal the late fee. **I AM NOW ENCLOSING MY NEW CHECK NO. 3884 FOR \$165**, which I hope is acceptable.

I would greatly appreciate your assistance in this matter.

Sincerely,

Linda Brodsky
Linda Brodsky

Enclosures