

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000001182

Entity Name: A.S.A. HOME CARE, INC.

FILED  
Feb 01, 2012  
Secretary of State

**Current Principal Place of Business:**

8700 WEST FLAGLER STREET  
110  
MIAMI, FL 33174 US

**New Principal Place of Business:**

**Current Mailing Address:**

8700 WEST FLAGLER STREET  
110  
MIAMI, FL 33174 US

**New Mailing Address:**

FEI Number: 65-0462280      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JIMENEZ, DIEGO A ADMIN.  
8700 WEST FLAGLER STREET  
SUITE 110  
MIAMI, FL 33174 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JIMENEZ, DIEGO A  
Address: 8700 W. FLAGLER ST, #110  
City-St-Zip: MIAMI, FL 33174 US

Title: VTDS  
Name: CAMPILLO, DULCE M  
Address: 8700 W. FLAGLER ST, #110  
City-St-Zip: MIAMI, FL 33174 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: DIEGO JIMENEZ

PD

02/01/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date