

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000051482

Entity Name: HOME CARE NATIONAL, INC.

FILED
Jan 31, 2006
Secretary of State

Current Principal Place of Business:

4240 W 12 AVE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4240 W 12 AVE
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 65-0504105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, MAGALI G
19498 SW 17 CT.
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

RODRIGUEZ, MAGALI G
3039 SW 129 WAY
MIRAMAR, FL 33027 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: _____

Electronic Signature of Registered Agent

01/31/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: RODRIGUEZ, MAGALI G
Address: 19498 SW 17 CT.
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: RODRIGUEZ, MAGALI G
Address: 3039 SW 129 WAY
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MAGALI G RODRIGUEZ

Electronic Signature of Signing Officer or Director

PRES

01/31/2006

Date