FILE NOW: FILING FEE AFTER MAY 1 IS $225.00 200 + 8.75 = 208.75

FILED
96 MAY -1 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P94000064603

1. Corporation Name
ALLIANCE HOME CARE, INC.

Principal Place of Business
964 S.W. 82 AVE.
MIAMI, FLA. 33144

Mailing Address
964 S.W. 82 AVE.
MIAMI, FLA. 33144.

3. Date Incorporated or Qualified: 8/30/94
3a. Date of Last Report: 1995

2. Principal Place of Business
21 964 S.W. 82 AVE.
22 Suite, Apt. #, etc.
23 City & State: MIAMI, FLA.
24 Zip: 33144 25 Country: USA.

2a. Mailing Address
26 964 S.W. 82 AVE.
27 Suite, Apt. #, etc.
28 City & State: MIAMI, FLA.
29 Zip: 33144 30 Country: USA.

4. FEI Number: 650522865 ☐ 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

9. Name and Address of Current Registered Agent
RAUL F. PINO, P.A.
2440 CORAL WAY.
MIAMI, FLA. 33145.

10. Name and Address of New Registered Agent
81 Name: ROGELIO DEL PINO, ESQUIRE
82 Street Address (P.O. Box Number is Not Acceptable): 1835 WEST FLAGLER STREET.
83 SUITE - 201
84 City: MIAMI, FL 85 Zip Code: 33135

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: X [signature] 4/22/96
Signature, typed or printed name of registered agent and title, if applicable. (Note: Registered Agent's signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT/DIRECTOR ALDO SUAREZ 4431 S.W. 150 CT. MIAMI, FLA. 33185	☑ DELETE	1-1 TITLE / 1-2 NAME / 1-3 STREET ADDRESS / 1-4 CITY-ST-ZIP	PRESIDENT/DIRECTOR SILVIA SUAREZ 6050 S.W. 79 Ct. MIAMI, FLA. 33143.	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P./TREASURER/SECRETARY JOAQUIN T. VIDAL 347 MALVERNE RD. W.P.B., FLA. 33405	☑ DELETE	2-1 TITLE / 2-2 NAME / 2-3 STREET ADDRESS / 2-4 CITY-ST-ZIP	VICE-PRESIDENT/TREASURER/SECRETARY ANGEL SUAREZ 6050 S.W. 79 St. MIAMI, FLA. 33143.	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3-1 TITLE / 3-2 NAME / 3-3 STREET ADDRESS / 3-4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4-1 TITLE / 4-2 NAME / 4-3 STREET ADDRESS / 4-4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5-1 TITLE / 5-2 NAME / 5-3 STREET ADDRESS / 5-4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6-1 TITLE / 6-2 NAME / 6-3 STREET ADDRESS / 6-4 CITY-ST-ZIP		☐ Change ☐ Addition

400001827954
-05/20/96--01003--018
****208.75 ****208.75

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 or supplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Eduardo Angel Suarez 4/18/96.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

(305) 266-3327
Daytime Phone #