FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State b Sols of corporations P95000001400 (7) HOME HEALTH CONSULTANTS, INC. Mailing Address Principal Place of Business 12361 SAND WEDGE DR. 12361 SAND WEDGE DR. **BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33437** 3a. Date of Last Report 3. Date Incorporated or Qualified 01/01/1995 4, FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business (EIN 26 12361 Sand Wedge DR Suite, Apt. #, etc. 65 054 Not Applicable 21 12361 Sand Wedge DR \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be City & State Added to Fees Boynton Beach Trust Fund Contribution 23 BOYNTON Beach FL 33437 8. This corporation has liability for intangible tax under s 199.032, Country Country USA 33437 Florida Statutes Yes No 24 33437 25 USA 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) HESS, BRIAN D 9108 FRONT BEACH RD. R3 PANAMA CITY BEACH FL 32408 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 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. (NO'E Registered Agrent signature required when reinstating) Separating, type of our printed man ellot registered again and title if explicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE President 1. 1 TITLE 10.6 1.2 NAME LINDA K Donev DONEY, LINDA K 12361 SAND Wedge DR BOYNTON BEACH FL 33 13 STREET ADDRESS STREET ADDRESS 8269 TEXAS TRAIL BOYNTON 14 CHY-ST-ZIP **BOCA RATON FL 32487** CdY-SI-72 ☐ Addition DELFTE 2 1 TITLE BULF 2 ? NAME NAM 2.3 STREET ADDRESS STREET ADDRESS 24 CHY-ST-ZIP City St. Zir Change ■ Addition DELETE 3. 1 TITLE TIFLE 3.2 NAME NAM 3.3 STREET ADDRESS STREE: ACDRESS 3 4 City - St - ZiP CULY ST-ZIE Change Addition F1 DELETE 4 1 THLE THE 4.2 NAME Notes 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST-ZIP C-14 - S1 - 7.P ☐ Change Addition DELETE 5 1 TILLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST ZIF Change Addition DELETE 6 1 TITLE THE

14. If 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)(k), Florida Statules. 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

STHEET ACIDRESS

6.3 STREET ADDRESS

64 CITY - ST - 7IP

LINDA K. Donev 2/5/96

CR2E034 (12/95)