

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000060707

Entity Name: C.P.T. HOMECARE, INC.

FILED  
Mar 07, 2011  
Secretary of State

**Current Principal Place of Business:**

13390 SW 131 STREET  
UNIT 128  
MIAMI, FL 33186 US

**New Principal Place of Business:**

**Current Mailing Address:**

13390 SW 131 STREET  
UNIT 128  
MIAMI, FL 33186 US

**New Mailing Address:**

FEI Number: 65-0809606      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

TURNER, FRANTZ  
13390 SW 131 STREET  
MIAMI, FL 33186 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: FRANTZ TURNIER

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TURNER, FRANTZ  
Address: 13390 SW 131 STREET, UNIT 128  
City-St-Zip: MIAMI, FL 33186

Title: D  
Name: NORA, TURNIER  
Address: 13390 SW. 131 ST UNIT 128  
City-St-Zip: MIAMI, FL 33186

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: NORA TURNIER

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

D

03/07/2011

\_\_\_\_\_  
Date