2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2001 8:00 am
Secretary of State
08-13-2001 90145 016 ***150.00

0063181 AV

DOCUMENT # P96000030647

1. Entity Name
MORNINGSTAR HOME HEALTH SERVICES, INC.

Principal Place of Business	Mailing Address
2820 N. OAKLAND FOREST 204 FORT LAUDERDALE FL 33309 US	2820 N. OAKLAND FOREST 204 FORT LAUDERDALE FL 33309 US

UUUbUJ6J

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0660505 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CARON, DEBORAH 2820 N. OAKLAND FOREST DR 204 FORT LAUDERDALE FL 33309	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After September 12, 2001 Fee will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARON, DEBORAH 1235 NE 17TH WAY FT LAUDERDALE FL 33304	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (5/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Deborah Caron REQUIRED 8/07/2001 (954) 717-4013
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment 2

P96000030647
DU060985

2159 Date 4-11-2001
To Fla. Dep. of State
For Uniform Bus. Repat

	Balance Forward	6,304 00
	Deposit	
☐ Tax Item	Deposit	
	Total	
	Amount This Check	150 00
	Other Deductions	
	Balance Forward	6154 00

2160 Date 4-12-2001
To D. Carow
For Nursing Services 4/1 thru 4/7/01

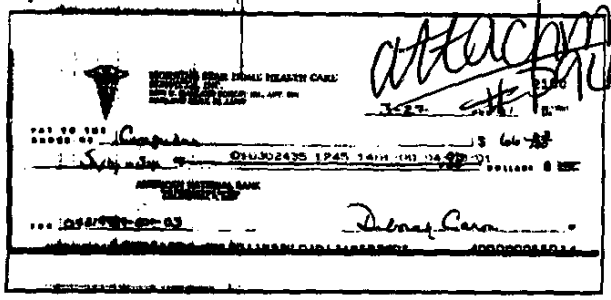
	Balance Forward	6154 00
	Deposit	
☐ Tax Item	Deposit	
	Total	
	Amount This Check	400 00
	Other Deductions	
	Balance Forward	5754 00

4035/4135

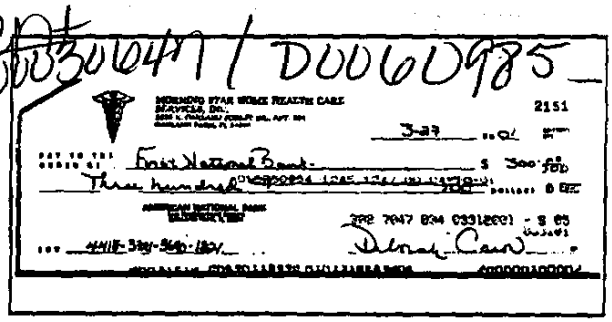
2161 Date 4-12-2001
To Cash
For

	Balance Forward	5754 00
	Deposit	
☐ Tax Item	Deposit	
	Total	
	Amount This Check	200 00
	Other Deductions	
	Balance Forward	5554 00

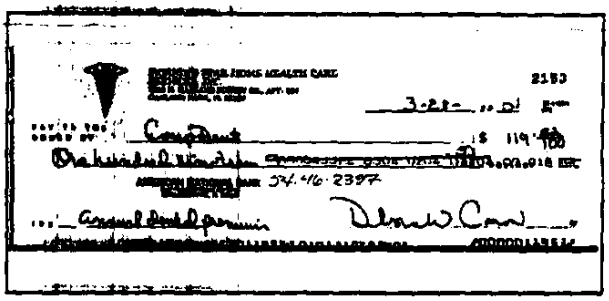
Attachment #1 / 0006 0985



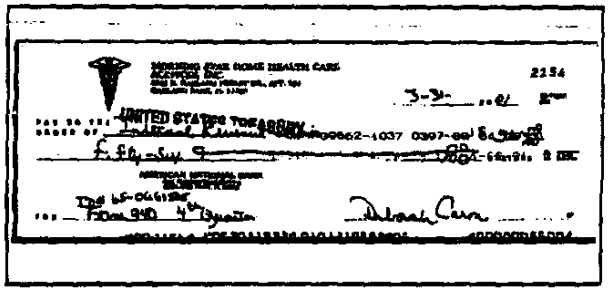
2150 04/03/01 66.03



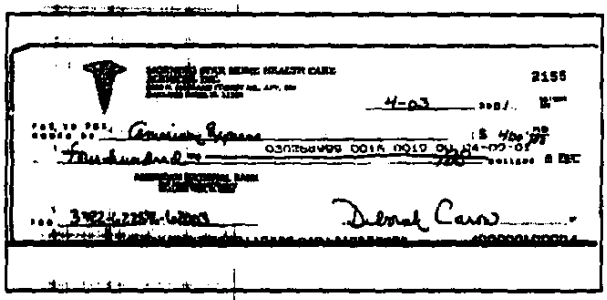
2151 04/03/01 300.00



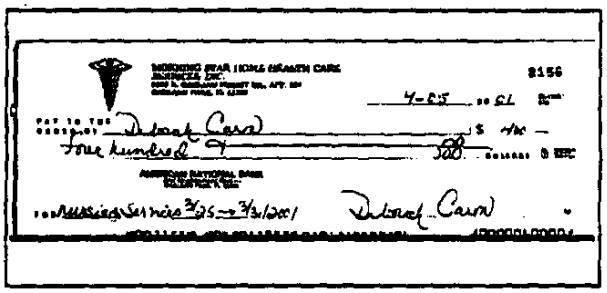
2153 04/09/01 119.52



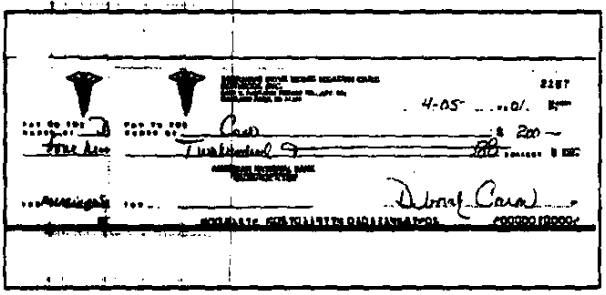
2154 04/09/01 56.00



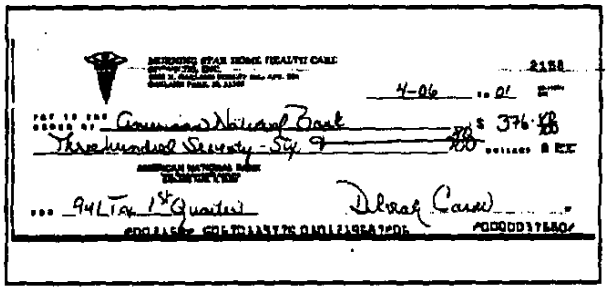
2155 04/09/01 400.00



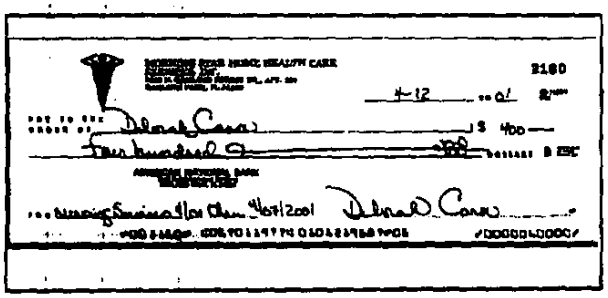
2156 04/06/01 400.00



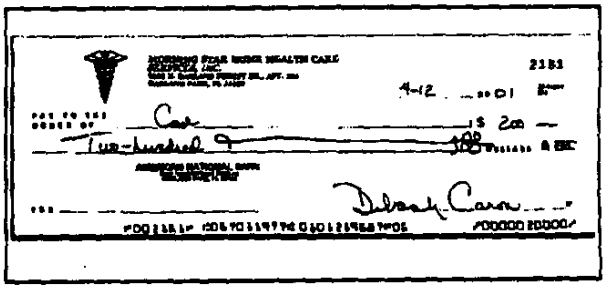
2157 04/06/01 200.00



2158 04/06/01 376.80



2160 04/12/01 400.00



2161 04/12/01 200.00

Please note: Check # 2159 never received

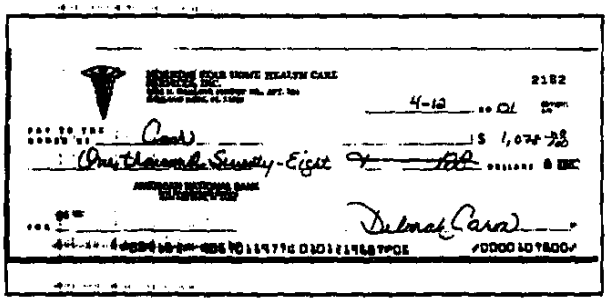
Bank

9600030647

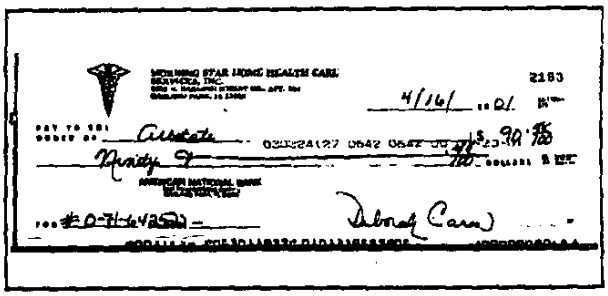
American NATIONAL BANK
Real Neighborhood Banking

Attachment #P960000306417 | D00060985

ACCOUNT: 1012196706
STATEMENT DATE: 04/30/01



2162 04/13/01 1,078.00



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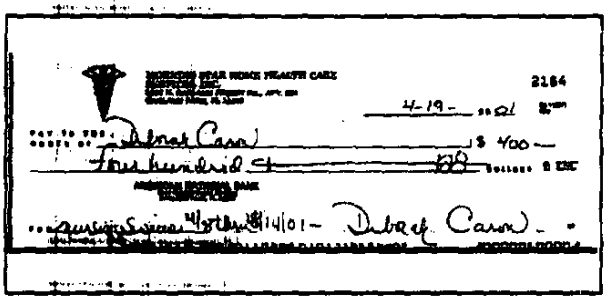
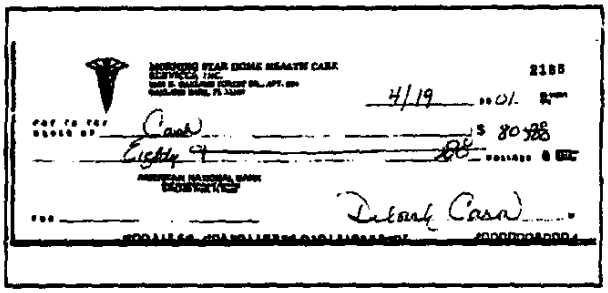
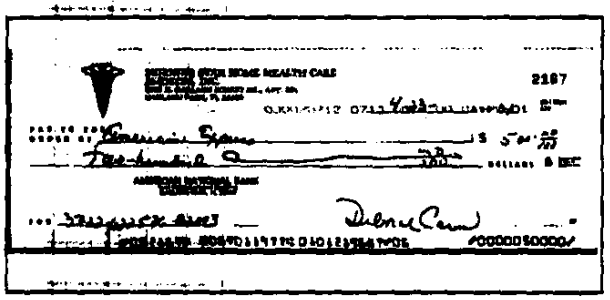


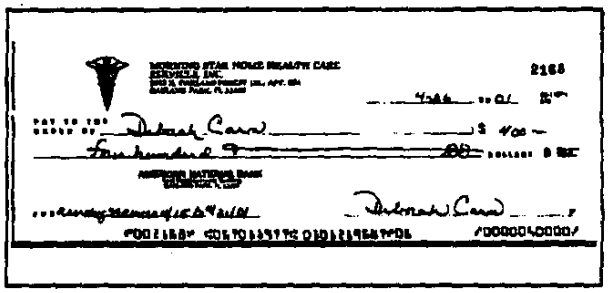
2164 04/19/01 400.00



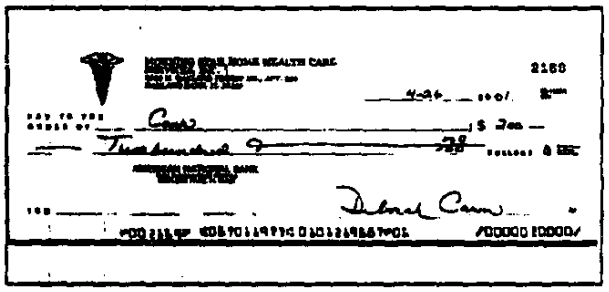
2165 04/19/01 80.00



2167 04/30/01 500.00



2168 04/26/01 400.00



2169 04/26/01 200.00

P960000306417