

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000049423

FILED
Jan 18, 2005
Secretary of State

Entity Name: BLANCO HOME HEALTH CARE CORPORATION

Current Principal Place of Business:

604 -606 NW 25TH AVENUE
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

604 -606 NW 25TH AVENUE
MIAMI, FL 33125

New Mailing Address:

FEI Number: 65-0676704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUIS, WILFREDO
604-606 NW 25TH AVENUE
MIAMI, FL 33125 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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: LUIS, SILA
Address: 604-606 NW 25H AVENUE
City-St-Zip: MIAMI, FL 33125

Title: PD () Delete
Name: LUIS, WILFREDO
Address: 604-606 NW 25H AVENUE
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SILA LUIS

PD

01/18/2005

Electronic Signature of Signing Officer or Director

Date