ECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
IOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

PROFIT CORPORATION ANNUAL REPORT
1997

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

FILED
Sep 19 1997 8:00am
Secretary of State

)OCUMENT # P96000059822 (2)
Corporation Name
MIAMI DADE HOME HEALTH AGENCY, INC.

ncipal Place of Business	Mailing Address
80 S.W. 8th Street Miami; Florida 33130	80 S.W. 8TH STREET MAIN FLOOR LOBBY MIAMI FL 33130

DO NOT WRITE IN THIS SPACE

Principal Place of Business 80 S.W. 8th Street	2a. Mailing Address 26 same as principal	3. Date Incorporated or Qualified 07/17/1996	3a. Date of Last Report
Suite, Apt. #, etc. Suite 2300	Suite, Apt. #, etc. place of business 27	4. FEI Number 65-0680716	Applied For Not Applicable
City & State Miami, Fl	City & State 28	5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
Zip 33130 Country 25 USA	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BURDETTE, WILLIAM R 80 S.W. 8TH ST. MAIN FLOOR LOBBY MIAMI FL 33130	81 Name: Solomon Goldner 82 Street Address (P.O. Box Number is Not Acceptable): 80 S.W. 8th Street, 23rd Floor 83: Suite 2300 84 City: Miami FL 85 Zip Code: 33130

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.

GNATURE _____ 9-17-97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
D ☐ DELETE BURDETTE, WILLIAM R 80 S.W. 8TH ST. MIAMI FL 33130	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP: C, D Solomon Goldner 80 SW 8th Street, 23rd Floor Miami, Fl 33130 Suite 2300 ☐ Change ☒ Addition
☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP: VC, D Howard Weiss 80 S.W. 8th Street, 23rd Floor Miami, Fl 33130 Suite 2300 ☐ Change ☒ Addition
☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP: D Sam Fogelman 80 S.W. 8th Street, 23rd Floor Miami, Fl 33130 Suite 2300 ☐ Change ☒ Addition
☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP: D Wifredo Gort 23rd Floor 80 S.W. 8th Street, Suite 2300 Miami, Fl 33130 ☐ Change ☒ Addition
☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP: D Joe Perez 80 S.W. 8th Street, 23rd Floor Miami, Fl 33130 Suite 2300 ☐ Change ☒ Addition
☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP: S Martin Weiss 80 S.W. 8th Street, 23rd Floor Miami, Fl 33130 Suite 2300 ☐ Change ☒ Addition

I do 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 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.

CR2E034 (4/97)