

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000080590

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** ENERY HOME HEALTH CARE, INC.

**Current Principal Place of Business:**

7570 NW 14 STREET  
SUITE 113  
MIAMI, FL 33126

**New Principal Place of Business:**

7705 NW 29 STREET  
SUITE 103  
DORAL, FL 33122

**Current Mailing Address:**

7570 NW 14 STREET  
SUITE 113  
MIAMI, FL 33126

**New Mailing Address:**

7705 NW 29 STREET  
SUITE 103  
DORAL, FL 33122

**FEI Number:** 65-0437607

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRUZ, IRENE E  
6475 SW 34 STREET  
MIAMI, FL 33155 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:** PVST  
**Name:** CRUZ, IRENE E  
**Address:** 6475 SW 34 STREET  
**City-St-Zip:** MIAMI, FL 33155

**Title:** D  
**Name:** CRUZ, IRENE E  
**Address:** 6475 SW 34 STREET  
**City-St-Zip:** MIAMI, FL 33155

**Title:** D  
**Name:** CRUZ, OSMANY  
**Address:** 6475 SW 34 STREET  
**City-St-Zip:** MIAMI, FL 33155

**Title:** D  
**Name:** CRUZ, IVAN  
**Address:** 6475 SW 34 STREET  
**City-St-Zip:** MIAMI, FL 33155

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:** IRENE E. CRUZ

PRES

02/17/2010

Electronic Signature of Signing Officer or Director

Date