

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000025208

FILED  
Apr 13, 2012  
Secretary of State

Entity Name: FATIMA HOME CARE, INC.

**Current Principal Place of Business:**

1454 S.W. 1 STREET #120  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

1454 S.W. 1 STREET #120  
MIAMI, FL 33135

**New Mailing Address:**

FEI Number: 65-0743407

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BARREIRO, ZORAIDA A.  
1454 SW 1ST STREET  
SUITE 120  
MIAMI, FL 33135 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

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: BARREIRO, ALICIA  
Address: 1454 SW 1 ST., SUITE 120  
City-St-Zip: MIAMI, FL 33135

Title: VS  
Name: BARREIRO, ZORAIDA  
Address: 1454 SW 1 STREET STE 120  
City-St-Zip: MIAMI, FL 33135

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: ZORAIDA BARREIRO

VS

04/13/2012

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

\_\_\_\_\_  
Date