2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007
Secretary of State

DOCUMENT# P97000041264

Entity Name: COMFORT CARE CORP.

Current Principal Place of Business:

5890 SW 8TH STREET
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

5890 SW 8TH STREET
MIAMI, FL 33144

New Mailing Address:

5631 BISCAYNE BLVD
MIAMI, FL 33137

FEI Number: 65-0790242 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALDES, ORLANDO
5890 SW 8 STREET
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

VALDES, ORLANDO
5631 BISCAYNE BLVD
MIAMI, FL 33137 US

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: ORLANDO VALDES 02/05/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: VALDES, ORLANDO DR.
Address: 9551 SW 56 CT
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: VALDES, ORLANDO
Address: 9551 SW 56 CT
City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ORLANDO VALDES D 02/05/2007
Electronic Signature of Signing Officer or Director Date