

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000002218

FILED
Apr 09, 2010
Secretary of State

Entity Name: QUALIFIED HOMECARE SERVICES, INC.

Current Principal Place of Business:

2500 N. UNIVERSITY DR.
SUITE 2
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

PO BOX 640950
NORTH MIAMI BCH, FL 33164

New Mailing Address:

PO BOX 640950
MIAMI, FL 33164

FEI Number: 65-0887626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLEAN, AUDREYA
5300 ALTON RD
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

MCLEAN, AUDREYA
2500 N. UNIVERSITY DRIVE
2
SUNRISE, FL 33322 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: AUDREYA MCLEAN

04/09/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: MCLEAN, AUDREYA K PD
Address: 2500 N. UNIVERSITY DRIVE # 2
City-St-Zip: SUNRISE, FL 33322

Title: VP
Name: NABAKA, JOSEPH O VP
Address: 2500 N. UNIVERSITY DRIVE #2
City-St-Zip: SUNRISE, FL 33322

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: AUDREYA MCLEAN

PD

04/09/2010

Electronic Signature of Signing Officer or Director

Date