

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P99000082044

**FILED**  
**May 18, 2011**  
**Secretary of State**

**Entity Name:** GRAND OPPORTUNITY HOME HEALTH INC.

**Current Principal Place of Business:**

1250 SW 27 AVE.  
SUITE 306  
MIAMI, FL 331354749

**New Principal Place of Business:**

13911 S.W. 42ND STREET  
SUITE 201  
MIAMI, FL 33175 US

**Current Mailing Address:**

1250 SW 27 AVE.  
SUITE 306  
MIAMI, FL 331354749

**New Mailing Address:**

13911 S.W. 42ND STREET  
SUITE 201  
MIAMI, FL 33175 US

**FEI Number:** 65-0948487

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PENA, MAYRA  
1250 SW 27 AVE  
SUITE 306  
MIAMI, FL 33135 US

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

FERNANDEZ CASTANO, AILIUJ  
13911 S.W. 42ND STREET  
SUITE 201  
MIAMI, FL 33175 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: AILIUJ FERNANDEZ CASTANO

05/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DVP  
Name: PENA, MAYRA  
Address: 13911 S.W. 42ND STREET, SUITE 201  
City-St-Zip: MIAMI, FL 33175 US

Title: DP  
Name: FERNANDEZ CASTANO, AILIUJ  
Address: 13911 S.W. 42ND STREET, SUITE 201  
City-St-Zip: MIAMI, FL 33175 US

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: MAYRA PENA

VP

05/18/2011

Electronic Signature of Signing Officer or Director

Date