

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000082044

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 65-0948487      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

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

DP

01/17/2012

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

\_\_\_\_\_  
Date