

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000008378

**Entity Name:** NEIGHBORHOOD HOME HEALTH SERVICES, INC.

**Current Principal Place of Business:**

10300 SW 72 ST  
SUITE 414  
MIAMI, FL 33173

**Current Mailing Address:**

9835 SW 53 TERR  
MIAMI, FL 33165

**FEI Number:** 26-2751808

**Certificate of Status Desired:** No

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

FLORES, GLORIA L  
9835 SW 53 TERR  
MIAMI, FL 33165 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	VP
Name	FLORES, GLORIA L	Name	FLORES, ALVARO J
Address	9835 SW 53 TERR	Address	9835 SW 53 TERR
City-State-Zip:	MIAMI FL 33165	City-State-Zip:	MIAMI FL 33165
Title	CFO		
Name	FLORES, GERARDO A		
Address	9835 SW 53 TERR		
City-State-Zip:	MIAMI FL 33165		

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALVARO FLORES

VP

03/19/2013

Electronic Signature of Signing Officer/Director Detail

Date