## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J29527

**Entity Name: MS HOME CARE CORPORATION** 

**Current Principal Place of Business:** 

1380 N.E. MIAMI GARDENS DRIVE

SUITE 166 MIAMI, FL 33179

**Current Mailing Address:** 

1380 N.E. MIAMI GARDENS DRIVE

SUITE 166

MIAMI, FL 33179 US

FEI Number: 59-2732515 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRASSIE, YVONNE GESQ. 3916 IRVINGTON AVENUE MIAMI, FL 33133 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

**FILED** Apr 30, 2013

**Secretary of State** 

CC2474450296

Officer/Director Detail:

SEC Title Title CEO

ELKINS, SHIRLENE ELKINS, ROBERT Name Name

Address 1380 N.E. MIAMI GARDENS DRIVE Address 1380 N.E. MIAMI GARDENS DRIVE

> SUITE 166 **SUITE 166**

MIAMI FL 33179 MIAMI FL 33179 City-State-Zip: City-State-Zip:

Title **PRES** Title **EVP FINANCE** 

REYNOLDS, LORETTA SYKES, G. HARLEY Name Name

1380 N.E. MIAMI GARDENS DRIVE 1380 N.E. MIAMI GARDENS DRIVE Address Address SUITE 166

SUITE 166

MIAMI FL 33179 City-State-Zip: MIAMI FL 33179 City-State-Zip:

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.