2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2014
Secretary of State
CC7903230397

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Entity Name: ABSOLUTE CARE AND HABILITATIVE SERVICES INC.

Current Principal Place of Business:

6022 SWEET WILLIAM TERRACE
LAND O LAKES, FL 34639

Current Mailing Address:

23110 SR.54
#207
LUTZ, FL 33549

FEI Number: 02-0626504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCNEIL, SEKINAT OCEO
6022 SWEET WILLIAM TERRACE
LAND O LAKES, FL 34639 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	PRESIDENT	Title	VP
Name	MCNEIL, SEKINAT O	Name	MCNEIL, JESSIE J
Address	6022 SWEET WILLIAM TERRACE	Address	6022 SWEET WILLIAM TERRACE
City-State-Zip:	LAND O LAKES FL 34639	City-State-Zip:	LAND O LAKES FL 34639

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: SEKINAT O. MCNEIL PRESIDENT 03/31/2014

Electronic Signature of Signing Officer/Director Detail — Date