

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000135238

**Entity Name:** HOME CARE UNLIMITED, INC.

**Current Principal Place of Business:**

13000 SW 120 STREET  
SUITE 201  
MIAMI, FL 33186

**Current Mailing Address:**

13000 SW 120 STREET  
SUITE 201  
MIAMI, FL 33186 US

**FEI Number:** 20-1683488

**Certificate of Status Desired:** Yes

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

LOPEZ, IVAN L  
13000 SW 120 STREET  
SUITE 201  
MIAMI, FL 33186 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 PT  
Name LOPEZ, IVAN L  
Address 13000 SW 120TH STREET, SUITE 201  
City-State-Zip: MIAMI FL 33186

Title VP  
Name MARTINEZ, JOSE R  
Address 13000 SW 120TH STREET, SUITE 201  
City-State-Zip: MIAMI FL 33186

Title S  
Name COBAS, DEBORAH M  
Address 13000 SW 120TH STREET, SUITE 201  
City-State-Zip: MIAMI FL 33186

*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:** DEBORAH COBAS

**SECRETARY**

**04/03/2013**

Electronic Signature of Signing Officer/Director Detail

Date