# SIGNATURE: MERCEDES DOMINGUEZ

above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

14850 SW 26 ST STE 205 MIAMI, FL 33185 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	MERCEDES DOMINGUEZ			04/07/2017
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	VP	Title	PD	
Name	DOMINGUEZ, MERCEDES	Name	DOMINGUEZ, MERCEDES	
Address	14850 SW 26 ST. STE 205	Address	14850 SW 26 ST. STE 205	
City-State-Zip:	MIAMI FL 33185	City-State-Zip:	MIAMI FL 33185	

# **Current Mailing Address:**

MIAMI, FL 33185 US

# Name and Address of Current Registered Agent:

DOMINGUEZ, MERCEDES

# FEI Number: 74-3179197

# DOCUMENT# P06000053392

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: ML HOME CARE.INC

### **Current Principal Place of Business:**

14850SW 26 ST SUITE 205 MIAMI, FL 33185

14850 SW 26 ST SUITE 205

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

PRESIDENT

04/07/2017

Date

# FILED Apr 07, 2017 Secretary of State CC6025544911

Certificate of Status Desired: No