

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000090740

Entity Name: BEATRIZ HOME HEALTH CARE, INC.

Current Principal Place of Business:

9801 COLLINS AVE STE 105
BAL HARBOUR, 33154

Current Mailing Address:

9801 COLLINS AVE STE 105
BAL HARBOUR, 33154 AF

FEI Number: 45-0590925

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PUPO, VLADIMIR
3120 SW 142 AVE
MIAMI, FL 33175 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 MR
Name PUPO, VLADIMIR
Address 3120 SW 142 AVE
City-State-Zip: MIAMI FL 33175

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: VLADIMIR PUPO

ADMINISTRATOR/OWNER 01/03/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date