2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000080924

Entity Name: NS HOME HEALTH CARE, INC.

Current Principal Place of Business:

4615 NW 72 AVE

108

MIAMI, FL 33166

Current Mailing Address:

4615 NW 72 AVE 108

MIAMI, FL 33166 US

FEI Number: 26-3330782 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAMPER, HECTOR A 4615 NW 72 AVE STE 108 MIAMI, FL 33166 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: HECTOR A SAMPER 02/18/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PDST

Name SAMPER, HECTOR A

Address 4615 NW 72 AVE

SUITE 108

SIGNATURE: HECTOR A SAMPER

City-State-Zip: MIAMI FL 33166

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.

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

02/18/2013

FILED Feb 18, 2013

Secretary of State

CC6970092625

Date