

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000106473

Entity Name: APOLLO ADVANCED HOME HEALTH, CORP.

Current Principal Place of Business:

4019 W. WATERS AVENUE,
STE. E
TAMPA, FL 33614

Current Mailing Address:

4019 W WATERS AVE
E
TAMPA, FL 33614 US

FEI Number: 26-3821624

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, JOSE M
4019 W WATERS AVE
E
TAMPA, FL 33614 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	P	Title	VP
Name	MARTINEZ, JOSE M	Name	CONCEPCION, JUSTO R
Address	4019 W WATERS AVE E	Address	4019 W WATERS AVE E
City-State-Zip:	TAMPA FL 33614	City-State-Zip:	TAMPA FL 33614

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: JOSE M MARTINEZ

PRESIDENT

04/25/2014

Electronic Signature of Signing Officer/Director Detail

Date