

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000100100

Entity Name: AMERICAN CARE OF NORTH FLORIDA, INC.

Current Principal Place of Business:

11255 S.W. 211TH STREET
MIAMI, FL 33189

Current Mailing Address:

11255 S.W. 211TH STREET
MIAMI, FL 33189

FEI Number: 27-4220284

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROMANCE, MARK
201 S. BISCAYNE BLVD.
STE 1000
MIAMI, FL 33131 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	PTD	Title	VP
Name	GARCIA, JOSE EMD	Name	GARCIA, LODOISKA
Address	11255 S.W. 211TH STREET	Address	11255 S.W. 211TH STREET
City-State-Zip:	MIAMI FL 33189	City-State-Zip:	MIAMI FL 33189

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: LODOISKA GARCIA

VP

02/07/2013

Electronic Signature of Signing Officer/Director Detail

Date