## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000041586

Entity Name: ABSOLUTE HOME CARE, INC.

**Current Principal Place of Business:** 

1430 NORTH FEDERAL HIGHWAY SUITE 200A FORT LAUDERDALE, FL 33304

## **Current Mailing Address:**

1430 NORTH FEDERAL HIGHWAY SUITE 200 FORT LAUDERDALE, FL 33304 US

FEI Number: 65-0421547 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WHARTON, JENNIFER ESQ. 1430 NORTH FEDERAL HIGHWAY SUITE 200A FORT LAUDERDALE, FL 33304 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

FILED Jun 16, 2020

**Secretary of State** 

9680861761CC

## Officer/Director Detail:

Title D Title D

Name SHAW, NORMA Name SHAW, BERNARD R

Address 1430 NORTH FEDERAL HIGHWAY Address 1430 NORTH FEDERAL HIGHWAY

SUITE 200A SUITE 200A

City-State-Zip: FORT LAUDERDALE FL 33304 City-State-Zip: FORT LAUDERDALE FL 33304

Title D Title D

Name WHARTON, ERNEST Name WHARTON, JENNIFER

Address 1430 NORTH FEDERAL HIGHWAY Address 1430 NORTH FEDERAL HIGHWAY

SUITE 200A SUITE 200A

City-State-Zip: FORT LAUDERDALE FL 33304 City-State-Zip: FORT LAUDERDALE FL 33304

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.