

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000004279

Entity Name: DYNAMIC CARE, INC.

Current Principal Place of Business:

609 MAITLAND AVE
STE 4
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

609 MAITLAND AVE
STE 4
ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3562271

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPERFITO, DAMION S
609 MAITLAND AVE
STE 4
ALTAMONTE SPRINGS, FL 32701 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 PS
Name LOPERFITO, DAMION S
Address 609 MAITLAND AVE STE4
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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: DAMION S. LOPERFITO

PS

02/08/2013

Electronic Signature of Signing Officer/Director Detail

Date