

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000019738

Entity Name: P & M HOME HEALTH SERVICES LLC

Current Principal Place of Business:

3801 N UNIVERSITY DR
STE 317B
SUNRISE, FL 33351

Current Mailing Address:

3801 N UNIVERSITY DR
STE 317B
SUNRISE, FL 33351 US

FEI Number: 26-2025165

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERNANDO, MORENO
3801 N UNIVERSITY DR STE 317B
SUNRISE, FL 33351-6317 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

Authorized Person(s) Detail :

Title MGR
Name MORENO, HERNANDO
Address 3801 N UNIVERSITY DR STE 317B
City-State-Zip: SUNRISE FL 33351-6317

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HERNANDO MORENO

MGR

01/15/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date