

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000068469

Entity Name: MY HOME ELDER CARE LLC

Current Principal Place of Business:

5856 WEST FLAGLER ST
MIAMI, FL 33144

Current Mailing Address:

5856 WEST FLAGLER ST
MIAMI, FL 33144

FEI Number: 27-0577803

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARO, MARIA ISABEL
5856 WEST FLAGLER ST
MIAMI, FL 33144 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 MGRM
Name CARO, MARIA I
Address 5700 SW 51 ST.
City-State-Zip: MIAMI FL 33155

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIA I. CARO

MEMBER

04/02/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date