2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001394

FILED Apr 24, 2007 Secretary of State

Entity Name: UHZ SPORTS MEDICINE RESEARCH FOUNDATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
1150 CAN	/IPO SANO AV	E		
200 Coral G	ABLES, FL 33	1146		
	Mailing Addre		New Mailing Addres	ce.
	_		New maning Address	
1150 CAN 200	IPO SANO AV	E		
	ABLES, FL 33	146		
FEI Numbe	r: 65-0896410	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
	AN, BARRY I C JTH WEST 81			
MIAMI, FL	33143 US	DIX.,#210		
MIAMI, FL The above n the Stat	a 33143 US e named entity te of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
MIAMI, FL The above	33143 US e named entity te of Florida.	submits this statement for the բ		ed office or registered agent, or both, Date
MIAMI, FL The above n the Stat	e named entity te of Florida. JRE: Electro	submits this statement for the particles of Registered Agric Signature of Registered Agr	ent	
MIAMI, FL The above n the Stat	e named entity te of Florida. JRE: Electroi RS AND DIREC PD (ZVIJAC, JOHN	submits this statement for the particles of Registered Agreements: TORS: Delete E MD L AVENUE UNIT 1801	ent	Date
MIAMI, FL The above n the Stat SIGNATU OFFICER Title: Name: Address:	e named entity te of Florida. JRE: Electron RS AND DIREC PD (ZVIJAC, JOHN 1627 BRICKEL MIAMI, FL 331 VP (URIBE, JOHN 3311 SOUTH M	submits this statement for the particles of Registered Agreements: TORS: Delete E MD L AVENUE UNIT 1801	ent ADDITIONS/CHANG Title: Name: Address:	Date SES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROCHELLE S. MATZA CFO 04/24/2007