2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006311

27785 AUBURN LANE

MORENO VALLEY, CA 92555

Address:

City-St-Zip:

FILED Mar 26, 2009 Secretary of State

Entity Nar	me: GLOBAL	UNITY CARE, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
7932 FORT KING ROAD ZEPHYRHILLS, FL 99541				7932 FORT KING ROAD ZEPHYRHILLS, FL 33541		
Current Mailing Address:			New Maili	New Mailing Address:		
26246 KAL RANCHO	.MIA AVE BELAGO, CA	92555				
FEI Number:	: 33-0958582	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
500 E. KEN SUITE 200	NNEDY BLVD	ER & BOLVES P.A.				
	named entity of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	C (CHIN, PHILLIP 3445 WOODB KISSIMMEE, F	ERRY COURT	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	P (ADLER, MARK 1024 CHRISTI CORONA, CA	AN CIRCLE	Title: Name: Address: City-St-Zip:	(() Change() Addition	
Title: Name: Address: City-St-Zip:	VON DEAUXPI 26246 KALMIA) Delete .ETTE, LORRAINE .AVE AGO, CA 92555	Title: Name: Address: City-St-Zip:	VON DEAUXF 26246 KALMI	(X) Change () Addition PLETTE, LORRAINE A IA AVE LAGO, CA 92555	
Title: Name:	T (PERRY, VIRE) Delete TA	Title: Name:	T (PERRY, VIRE	(X) Change ()Addition ETTA P	

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

27785 AUBURN LANE

MORENO VALLEY, CA 92555

SIGNATURE: LORRAINE A. VON DEAUXPLETTE SEC 03/26/2009