

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000076395

**Entity Name:** OSCEOLA URGENT CARE INC.

**Current Principal Place of Business:**

1016 MANN ST.  
KISSIMMEE, FL 34741

**Current Mailing Address:**

1016 MANN ST.  
KISSIMMEE, FL 34741

**FEI Number:** 46-3670065

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

AFZAL, AJAZ  
1016 MANN ST.  
KISSIMMEE, FL 34741 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 P  
Name AFZAL, AJAZ  
Address 1016 MANN ST.  
City-State-Zip: KISSIMMEE FL 34741

*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:** AJAZ AFZAL

P

02/27/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date