F06000003664

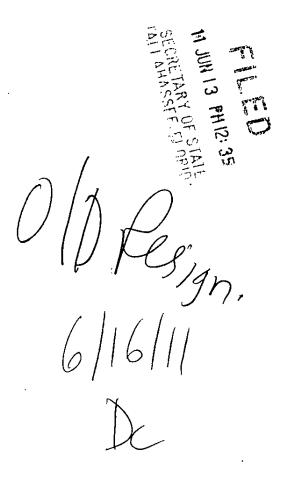
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





600207985796

06/13/11--01036--017 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Universal Health Care Group, Inc.
(Name of Corporation)
DOCUMENT NUMBER: F06000003664
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Sandip I. Patel
(Name of Person)
Universal Health Care Group, Inc.
(Name of Firm/Company)
100 Central Ave, Suite 200
(Address)
St. Petersburg, FL 33701
(City/State and Zip Code)
For further information concerning this matter, please call:
Sandip I. Patel at (727) 456-2900 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Dennis Kant	, hereby resign as CFO
7	(Title)
of_ Universal Health Care Group,	,
(Name	e of Corporation)
F0600003664 (Document Number, if known)	, a corporation organized under the laws of the State of
Delaware	
	Signature of resigning officer/director) SFECRETARY OF STARY OF S

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314