

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K95816

FILED
Apr 08, 2011
Secretary of State

Entity Name: UNIVERSAL MEDICAL CONCEPTS, INC.

Current Principal Place of Business:

6245 N. FEDERAL HWY
SUITE 300
FT. LAUDERDALE, FL

New Principal Place of Business:

Current Mailing Address:

6245 N FEDERAL HIGHWAY
SUITE 300
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-0620179 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HARKINS, CHRISTOPHER
6245 N FEDERAL HIGHWAY
SUITE 300
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD
Name: NAGER, BRUCE
Address: 6245 N FEDERAL HIGHWAY, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL US

Title: DST
Name: HARKINS, CHRISTOPHER T
Address: 6245 N FEDERAL HIGHWAY, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL US

Title: D
Name: SCHWARTZ, HARVEY MD
Address: 6245 N FEDERAL HIGHWAY, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL US

Title: D
Name: ROGGENBUCK, KLAUS
Address: 6245 N FEDERAL HIGHWAY, SUITE 300
City-St-Zip: FT LAUDERDALE, FL US

Title: D
Name: DIRKSEN, VOLKMAR
Address: 6245 N FEDERAL HIGHWAY, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL US

Title: D
Name: YOUNKER, KURT
Address: 6245 N FEDERAL HIGHWAY, SUITE 300
City-St-Zip: FT LAUDERDALE, FL US

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: CHRISTOPHER HARKINS

TR

04/08/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date