2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2010
Secretary of State

DOCUMENT# L09000058307

Entity Name: URGENT CARE CENTER OF CORAL GABLES, LLC

Current Principal Place of Business:

275 ALHAMBRA CIR.
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 565361
MIAMI, FL 332565361

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSEN, KAREN Z ESQ
275 ALHAMBRA CIR.
CORAL GABLES, FL 33134 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ROSEN, KAREN A ESQ
Address: P.O.BOX 565361
City-St-Zip: MIAMI, FL 332565361

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: KAREN Z. ROSEN, ESQ. MGRM 02/04/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date