

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008698

FILED
Feb 26, 2012
Secretary of State

Entity Name: URBAN HEALTH PARTNERSHIPS, INCORPORATED

Current Principal Place of Business:

1800 SW 1ST AVENUE SUITE 603
MIAMI, FL 33129 US

New Principal Place of Business:

Current Mailing Address:

1800 SW 1ST AVENUE SUITE 603
MIAMI, FL 33129 US

New Mailing Address:

FEI Number: 45-3332540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCES DE MARCILLA, ANAMARIE
4779 COLLINS AVENUE
3005
MIAMI, FL 33140 US

Name and Address of New Registered Agent:

ROVIRA, ISABEL M
10820 SW 78 AVENUE
MIAMI, FL 33156 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: ISABEL M ROVIRA

02/26/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: EXCD
Name: GARCES DE MARCILLA, ANAMARIE
Address: 4779 COLLINS AVENUE APT 3005
City-St-Zip: MIAMI, FL 33140 US

Title: FO
Name: ROVIRA, ISABEL M
Address: 10820 SW 78 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: AO
Name: PATTERSON, EDITH H
Address: 90 EDGEWATER DRIVE APT 709
City-St-Zip: CORAL GABLES, FL 33133 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ISABEL M ROVIRA

FO

02/26/2012

Electronic Signature of Signing Officer or Director

Date