2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P00000058444

Entity Name: UNITED MEDICAL NETWORK, INC.

Current Principal Place of Business:

1287 EAST NEWPORT CENTER DRIVE
SUITE 207
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

1197 W. NEWPORT CENTER DRIVE
DEERFIELD BEACH, FL 33442

Current Mailing Address:

1287 EAST NEWPORT CENTER DRIVE
SUITE 207
DEERFIELD BEACH, FL 33442

New Mailing Address:

1197 W. NEWPORT CENTER DRIVE
DEERFIELD BEACH, FL 33442

FEI Number: 65-1016626 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: LANGNER, JOSEPH
Address: 1287 EAST NEWPORT CENTER DRIVE SUITE 207
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: V ( ) Delete
Name: LANGNER, JOSEPH
Address: 1287 EAST NEWPORT CENTER DRIVE SUITE 207
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: LANGNER, JOSEPH
Address: 1197 W. NEWPORT CENTER DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: V (X) Change ( ) Addition
Name: LANGNER, JOSEPH
Address: 1197 W. NEWPORT CENTER DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33442

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSEPH LANGNER PRES 04/30/2008

Electronic Signature of Signing Officer or Director Date