

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000092782

Entity Name: E R URGENT CARE MANAGEMENT CO., INC.

FILED
Apr 29, 2003
Secretary of State

Current Principal Place of Business:

215 N. FEDERAL HWY
HALLANDALE, FL 33009 US

New Principal Place of Business:

850 IVES DAIRY ROAD
T-64
NORTH MIAMI BEACH, FL 33179 US

Current Mailing Address:

215 N. FEDERAL HWY
HALLANDALE, FL 33009 US

New Mailing Address:

850 IVES DAIRY ROAD
T-64
NORTH MIAMI BEACH, FL 33179 US

FEI Number: 65-1050592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, JERRY
1100 COLLINS AVE., PH-2
MIAMI, FL 33139

Name and Address of New Registered Agent:

MILLER, JERRY
850 IVES DAIRY ROAD
T-64
NORTH MIAMI BEACH, FL 33179

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: JERRY MILLER

04/29/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLER, JERRY
Address: 215 N. FEDERAL HWY
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MILLER, JERRY
Address: 850 IVES DAIRY ROAD
City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: JERRY MILLER

DIR

04/29/2003

Electronic Signature of Signing Officer or Director

Date