

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005394

FILED
Mar 20, 2006
Secretary of State

Entity Name: UNLIMITED CARE RESOURCES, INC.

Current Principal Place of Business:

2230 NW 152ND TERR.
OPA LOCKA, FL 330542726

New Principal Place of Business:

Current Mailing Address:

2230 NW 152ND TERR.
OPA LOCKA, FL 330542726

New Mailing Address:

FEI Number: 65-1067047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLER, SONYA
19001 NW 23 AVENUE
MIAMI GARDENS, FL 33056 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: PVPS () Delete
Name: REESE, SONYA
Address: 19001 NW 23RD AVE
City-St-Zip: MIAMI GARDENS, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SONYA M. REESE

PVPS

03/20/2006

Electronic Signature of Signing Officer or Director

Date