


FILED
Jul 17, 2006 08:00 AM
Secretary of State

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P01000026256 1. Entity Name UBAR MEDICAL SUPPLY CORP.	
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Principal Place of Business 10711 S.W. 216 STREET SUITE 110 MIAMI, FL 33170	Mailing Address 10711 S.W. 216 STREET SUITE 110 MIAMI, FL 33170
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DO NOT WRITE IN THIS SPACE



07062006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1082991	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALFONSO, ARELYS
 10711 S.W. 216 STREET
 SUITE 110 1
 MIAMI, FL 33170

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 IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST ALFONSO, ARELYS 10711 S.W. 216 STREET, SUITE 110 MIAMI, FL 33170
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 07/18/06-80012-012 158.75

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 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Arelys Alfonso* Date: 7/7/06 Daytime Phone #: 786-573-4915