2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009145

FILED Apr 13, 2008 Secretary of State

Entity Name: PEDIATRIC AND FAMILY URGENT CARE CENTERS OF SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 705 EAST 26TH STREET HIALEAH, FL 33013 **Current Mailing Address: New Mailing Address:** 705 EAST 26TH STREET HIALEAH, FL 33013 FEI Number: 80-0030421 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PENABAD, EDGARDO 705 E. 26ST HIALEAH, FL 33013 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PENABAD, EDGARDO Name: Name: 1015 COUNTRY CLUB PAADO Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: () Delete Title: Title: (X) Change () Addition FOX, TERESITA Name: FOX. TERESITA Name: 1015 COUNTRY CLUB PRADO Address: 1015 COUNTRY CLUB PRADO Address: CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip:

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: TERESITA FOX DV 04/13/2008