2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# P02000043933

Entity Name: U.S. MEDICAL CARE, INC.

Current Principal Place of Business:

3350 NW BOCA RATON BLVD.
SUITE B-38
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

3350 NW BOCA RATON BLVD.
SUITE B-38
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 45-0482536 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GREEN, MITCHELL
400 HOLLYWOOD BLVD
STE 485S
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

MOULAVI, SASSON
3350 NW BOCA RATON BLVD.
B38
BOCA RATON, FL 33431 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: SASSON MOULAVI 03/20/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: MOULAVI, SASSON MD
Address: 591 PHILLIPS DR
City-St-Zip: BOCA RATON, FL 33432

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 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: SASSON MOULAVI DPST 03/20/2009
Electronic Signature of Signing Officer or Director Date