

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095407

Entity Name: UNION HSA, CORP.

FILED  
May 18, 2007  
Secretary of State

## Current Principal Place of Business:

4050 EASTRIDGE CIRCLE  
POMPANO BEACH, FL 33064 US

## New Principal Place of Business:

## Current Mailing Address:

4050 EASTRIDGE CIRCLE  
POMPANO BEACH, FL 33064 US

## New Mailing Address:

FEI Number: 06-1645493

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SEVERO, MARLENE F  
4053 EASTRIDGE CIRCLE  
POMPANO BEACH, FL 33064 US

## Name and Address of New Registered Agent:

OLIVEIRA, SUELY R  
4050 EASTRIDGE CIRCLE  
POMPANO BEACH, FL 33064 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: SUELY R. OLIVEIRA

05/18/2007

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OLIVEIRA, SUELY R  
Address: 4050 EASTRIDGE CIRCLE  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: VP ( ) Delete  
Name: CAMPOS, HEBROM G  
Address: 4050 EASTRIDGE CIRCLE  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: D (X) Delete  
Name: SEVERO, MARLENE F  
Address: 4050 EASTRIDGE CIRCLE  
City-St-Zip: POMPANO BEACH, FL 33064 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: SUELY R. OLIVEIRA

P

05/18/2007

Electronic Signature of Signing Officer or Director

Date