2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125105

Entity Name: U & L THERAPY CENTER INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

42 NW 27 AVE., #315 3001 NW 49TH AVE MIAMI, FL 33125

SUITE # 202

LAUDERDALE LAKES, FL 33313

Current Mailing Address: New Mailing Address:

42 NW 27 AVE., #315 3001 NW 49TH AVE

MIAMI, FL 33125 SUITE #202

LAUDERDALE LAKES, FL 33313

FEI Number: 54-2083868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORLOTE, CARLOS FERNANDEZ, JOSELITO 42 NW 27 AVE #315 3001 NW 49TH AVE

MIAMI, FL 33125 SUITE 202 LAUDERDALE LAKES, FL 33313 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: JOSELITO FERNANDEZ 04/28/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition MORLOTE, CARLOS FERNANDEZ, JOSELITO Name: Name: 42 NW 27 AVE #315 3001 NW 49TH AVE SUITE # 202 Address: Address: City-St-Zip: MIAMI, FL 33125 City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: VΡ Title: VΡ (X) Change () Addition () Delete FERNANDEZ, JOSELITO Name: Name: GUTIERREZ, SANDRA

42 NW 27 AVE #315 3001 NW 49TH AVE SUITE# 202 Address: Address: MIAMI, FL 33125 LAUDERDALE LAKES, FL 33313 City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

GUTIERREZ, SANDRA Name: Name: 42 NW 27 AVE #315 Address: Address: City-St-Zip: MIAMI, FL 33125 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: JOSELITO FERNANDEZ **PRES** 04/28/2009