2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053769

Entity Name: URGENT CARE CENTER 441, CORP.

FILED Jan 28, 2005 Secretary of State

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

20821 NW 2 AVE 6895 SW 37TH STREET MIAMI, FL 33169 MIAMI, FL 33155

Current Mailing Address: New Mailing Address:

20821 NW 2 AVE 6895 SW 37TH STREET MIAMI, FL 33169 MIAMI, FL 33155

FEI Number: 41-2095308 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:

 DAZZA, ALYD
 MACIAS, NIURKA M.

 19461 NW 79 AVE
 6895 SW 37TH STREET

 MIAMI, FL 33015
 US

 MIAMI, FL 33155
 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: NIURKA MONSERRATE MACIAS 01/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 DAZZA, ALYD
 Name:
 MACIAS, NIURKA M.

 Address:
 19461 NW 79 AVE
 Address:
 6895 SW 37TH STREET

 City-St-Zip:
 MIAMI, FL 33015
 City-St-Zip:
 MIAMI, FL 33155

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

 Name:
 TERUEL, JOSE A
 Name:

 Address:
 9732 HAMMOCKS BLVD APT 102
 Address:

 City-St-Zip:
 MIAMI, FL 33196
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NIURKA MONSERRATE MACIAS PD 01/28/2005