

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000090137

FILED  
Sep 12, 2005  
Secretary of State

Entity Name: UNITED URGENT CARE CLINICS INC.

## Current Principal Place of Business:

402 CARMALITA STREET  
PUNTA GORDA, FL 33950

## New Principal Place of Business:

3594 BROADWAY  
SUITE A  
FT. MYERS, FL 33901

## Current Mailing Address:

402 CARMALITA STREET  
PUNTA GORDA, FL 33950

## New Mailing Address:

3594 BROADWAY  
SUITE A  
FT. MYERS, FL 33901

FEI Number: 06-1728249

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PIERRE, WILLIE  
2306 LAKEVIEW BLVD.  
PORT CHARLOTTE, FL 33952 US

## Name and Address of New Registered Agent:

PIERRE, WILLIE  
25100 SANDHILL BLVD  
APT. M101  
PUNTA GORDA, FL 33983 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: WILLIE PIERRE

09/12/2005

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: CEO ( ) Delete  
Name: PIERRE, WILLIE  
Address: 402 CARMALITA STREET  
City-St-Zip: PUNTA GORDA, FL 33950

Title: VP ( ) Delete  
Name: SEVERE, PASCALE  
Address: 402 CARMALITA STREET  
City-St-Zip: PUNTA GORDA, FL 33950

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: PIERRE, WILLIE  
Address: 25100 SANDHILL BLVD APT. M101  
City-St-Zip: PUNTA GORDA, FL 33983

Title: VP (X) Change ( ) Addition  
Name: SEVERE, PASCALE  
Address: 25100 SANDHILL BLVD APT. M101  
City-St-Zip: PUNTA GORDA, FL 33983

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: WILLIE PIERRE

CEO

09/12/2005

Electronic Signature of Signing Officer or Director

Date