2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# P04000139556

Entity Name: UNITED HEALTH PROVIDERS, INC

Current Principal Place of Business:

1681 WEST 37 STREET
HIALEAH, FL 33012

New Principal Place of Business:

1681 WEST 37 STREET
SUITE # 14
HIALEAH, FL 33012

Current Mailing Address:

1681 WEST 37 STREET
HIALEAH, FL 33012

New Mailing Address:

1681 WEST 37 STREET
SUITE # 14
HIALEAH, FL 33012

FEI Number: 20-1718786 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BOMBINO, ALEXANDER
1681 W 37 STREET
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

BOMBINO, ALEXANDER
1681 W 37 STREET
SUITE # 14
HIALEAH, FL 33012 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: 01/23/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: BOMBINO, ALEXANDER
Address: 1681 WEST 37 STREET, SUITE 14
City-St-Zip: HIALEAH, FL 33012

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: ALEXANDER BOMBINO SR 01/23/2009
Electronic Signature of Signing Officer or Director — Date