2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 05, 2006
Secretary of State

DOCUMENT# P05000040715

Entity Name: UNLIMITED MEDICAL CENTER, INC.

Current Principal Place of Business:

710 PALM AVE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

710 PALM AVE
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 35-2250019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NUNEZ, YOCIS
3745 W 2 AVE
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

VIGO COBO, ARTURO
710 PALM AVE
HIALEAH, FL 33010 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: ARTURO VIGO COBO 09/05/2006
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: PD ( ) Delete
Name: NUNEZ, YOCIS
Address: 710 PALM AVE
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: VIGO COBO, ARTURO
Address: 710 PALM AVE
City-St-Zip: HIALEAH, FL 33010

I hereby certify that the information supplied with this filing does not qualify for the 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: ARTURO VIGO COBO P 09/05/2006
Electronic Signature of Signing Officer or Director Date