

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000083049

Entity Name: U AND I HEALTH SERVICES INC.

FILED  
Apr 11, 2008  
Secretary of State

## Current Principal Place of Business:

2545B NW 72ND AVENUE  
MIAMI, FL 33122

## New Principal Place of Business:

6720 NW 174 TERR APT 18C  
HIALEAH, FL 33015

## Current Mailing Address:

2545B NW 72ND AVENUE  
MIAMI, FL 33122

## New Mailing Address:

6720 NW 174 TERR APT 18C  
HIALEAH, FL 33015

FEI Number: 13-4310336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D, P ( ) Delete  
Name: PARERA VAZQUEZ, LICED  
Address: 1350 SW 75 AVENUE  
City-St-Zip: MIAMI, FL 33144

Title: S, T ( ) Delete  
Name: PARERA VAZQUEZ, LICED  
Address: 1350 SW 75 AVENUE  
City-St-Zip: MIAMI, FL 33144

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change ( ) Addition  
Name: PARERA VAZQUEZ, LICED  
Address: 6720 NW 174 TERR APT 18C  
City-St-Zip: HIALEAH, FL 33015

Title: S, T (X) Change ( ) Addition  
Name: PARERA VAZQUEZ, LICED  
Address: 6720 NW 174 TERR APT 18C  
City-St-Zip: HIALEAH, FL 33015

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: LICED PARERA

DP

04/11/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date