

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000114407

FILED
Apr 30, 2007
Secretary of State

Entity Name: 444 URGENT CARE CENTERS, INC.

Current Principal Place of Business:

2540 N. STATE ROAD 7
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

9050 PINES BLVD
SUITE 301
PEMBROKE PINES, FL 33024 US

Current Mailing Address:

9050 PINES BLVD
301
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, BONNIE
9050 PINES BLVD
384
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

MILLER, BONNIE
9050 PINES BLVD
301
PEMBROKE PINES, FL 33024 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:

Electronic Signature of Registered Agent

04/30/2007

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHAPIRO, GUY
Address: 2540 N. STATE ROAD 7
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP (X) Delete
Name: LEWIN, ROBERT
Address: 2540 N. STATE ROAD 7
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEWIN, ROBERT
Address: 9050 PINES BLVD SUITE 301
City-St-Zip: PEMBROKE PINES, FL 33024

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: ROBERT LEWIN

Electronic Signature of Signing Officer or Director

P

04/30/2007

Date