2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000093351

Entity Name: UNITED CLINICAL RESEARCH, CORP.

FILED Apr 17, 2012 Secretary of State

Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
FEI Number: 27-4033763	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
6498 CORAL WAY MIAMI, FL 33155			
Current Mailing Address:		New Mailing Address:	
6498 CORAL WAY MIAMI, FL 33155			
Current Principal Place of Business:		New Principal Place of Business:	

PINERO-ALHADEFF, MARISEL 1500 WESTON RD STE 200 WESTON, FL 33326 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

Date

OFFICERS AND DIRECTORS:

Title: PT

Name: ALFONSO, ERNESTO SR Address: 6498 CORAL WAY City-St-Zip: MIAMI, FL 33155

Title: VP

Name: ALFONSO, TERESA B MD Address: 6498 CORAL WAY City-St-Zip: MIAMI, FL 33155

Title: S

Name: ALFONSO, IRENE Address: 6498 CORAL WAY City-St-Zip: MIAMI, FL 33155

Title: D

Name: SOCA, YENNY Address: 6498 CORAL WAY City-St-Zip: MIAMI, FL 33155

Title:

Name: ALFONSO, ERNESTO JR Address: 6498 CORAL WAY City-St-Zip: MIAMI, FL 33155

Title:

Name: TELLEZ, JESSICA Address: 6498 CORAL WAY City-St-Zip: MIAMI, FL 33155

I hereby 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 all other like empowered.

SIGNATURE: ERNESTO ALFONSO SR PT 04/17/2012