

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000079127

FILED  
Apr 26, 2005  
Secretary of State

Entity Name: UNITY MEDICAL CENTER, INC.

## Current Principal Place of Business:

8080 WEST FLAGLER STREET  
SUITE 3C  
MIAMI, FL 33144

## Current Mailing Address:

8080 WEST FLAGLER STREET  
SUITE 3C  
MIAMI, FL 33144

## New Principal Place of Business:

114 PONCE DE LEON BLVD,  
SUITE . A  
CORAL GABLES,, FL 33134

## New Mailing Address:

114 PONCE DE GABLES, BLVD  
SUITE . A  
CORAL GABLES, FL 33134

FEI Number: 65-0779793

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MERCEDES GONZALEZ  
8080 W FLAGLER ST  
MIAMI, FL 33144 US

## Name and Address of New Registered Agent:

MERCEDES GONZALEZ  
114 PONCE DE LEON BLVD  
SUITE. A  
CORAL GABLES, FL 33134 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:

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: GONZALEZ, MERCEDES  
Address: 8080 W FLAGLER ST, STE 3C  
City-St-Zip: MIAMI, FL 33144

Title: V ( ) Delete  
Name: PARGA, ANGEL  
Address: 8080 WEST FLAGLER STREET, SUITE 3C  
City-St-Zip: MIAMI, FL 33144

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: GONZALEZ, MERCEDES  
Address: 114 PONCE DE LEON , BLVD. SUITE. A  
City-St-Zip: CORAL GABLES, FL 33134

Title: V (X) Change ( ) Addition  
Name: PARGA, ANGEL  
Address: 114 PONCE DE LENO ,BLVD. SUITE.A  
City-St-Zip: CORAL GABLES,, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANGEL PARGA

VSP

04/26/2005

Electronic Signature of Signing Officer or Director

Date