2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2006
Secretary of State

DOCUMENT# P99000087197

Entity Name: URBAN MEDICAL PROVIDERS, INC.

Current Principal Place of Business:

13936 NW 7TH AVE
MIAMI, FL 33168

New Principal Place of Business:

13936 NW 7TH AVE
MIAMI, FL 33168 US

Current Mailing Address:

13936 NW 7TH AVE
MIAMI, FL 33168

New Mailing Address:

13936 NW 7TH AVE
MIAMI, FL 33168 US

FEI Number: 65-0955796 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCBEAN, ANTHONY
13936 NW 7TH AVE
MIAMI, FL 33168 US

Name and Address of New Registered Agent:

MCBEAN, ANTHONY L
13936 NW 7TH AVE
MIAMI, FL 33168 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: ANTHONY L MCBEAN 06/09/2006
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: D ( ) Delete
Name: MCBEAN, ANTHONY L
Address: 13956 NW 7TH AVE
City-St-Zip: MIAMI, FL 33168

Title: V (X) Delete
Name: MCBEAN, AKIEL
Address: 18115 N.W. 15TH COURT
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: MCBEAN, ANTHONY L
Address: 13956 NW 7TH AVE
City-St-Zip: MIAMI, FL 33168 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ANTHONY L MCBEAN D 06/09/2006
Electronic Signature of Signing Officer or Director Date