

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004175

Entity Name: UGSI, INC.

FILED
Feb 19, 2008
Secretary of State

Current Principal Place of Business:

13135 DANIELSON ST., SUITE 201
POWAY, CA 92064

New Principal Place of Business:

Current Mailing Address:

78-075 MAIN STREET, SUITE 202
LA QUINTA, CA 92253

New Mailing Address:

FEI Number: 87-0457059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCEO () Delete
Name: SEIDEL, ANDREW D
Address: 78-075 MAIN STREET, SUITE 202
City-St-Zip: LA QUINTA, CA 92253

Title: AS () Delete
Name: BUSHHORN, APRIL K
Address: 78075 MAIN STREET, SUITE 202
City-St-Zip: LA QUINTA, CA 92253

Title: VSD () Delete
Name: STANCZAK, STEPHEN P
Address: 78-075 MAIN STREET, SUITE 202
City-St-Zip: LA QUINTA, CA 92253

Title: D () Delete
Name: BLACK, PETER F
Address: 450 7TH AVE., SUITE 509
City-St-Zip: NEW YORK, NY 10123

Title: T () Delete
Name: PATEL, RAJESH P
Address: 13135 DANIELSON ST., SUITE 201
City-St-Zip: POWAY, CA 92064

Title: D () Delete
Name: HOMISH, HARRY
Address: 19211 PANAMA CITY BCH PKWY., SUITE 228
City-St-Zip: PANAMA CITY BCH, FL 32413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: SEIDEL, ANDREW D
Address: 13135 DANIELSON STREET
City-St-Zip: POWAY, CA 92064

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

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

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

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

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: APRIL K. BUSHHORN

AS

02/19/2008

Electronic Signature of Signing Officer or Director

Date