

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT # F94000000883

1. Entity Name
 UP & UP, INC.



Principal Place of Business
 2273 RESEARCH BLVD.
 4TH FLOOR
 ROCKVILLE, MD 20850 US

Mailing Address
 2273 RESEARCH BLVD.
 4TH FLOOR
 ROCKVILLE, MD 20850 US



01122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **52-1806976** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000100203846
 01/29/05-90042-013 150.00

10. OFFICERS AND DIRECTORS

TITLE P
 NAME RUBIN, DONALD
 STREET ADDRESS 115 FIFTH AVENUE 7TH FL
 CITY-ST-ZIP NEW YORK, NY 10003

TITLE T
 NAME GERSTEIN, RICHARD
 STREET ADDRESS 115 FIFTH AVEUE 7TH FL
 CITY-ST-ZIP NEW YORK, NY 10003

TITLE S
 NAME FELLER, MARCY
 STREET ADDRESS 115 FIFTH AVENUE 7TH FL
 CITY-ST-ZIP NEW YORK, NY 10003

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marcy E. Feller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/05

Date

312-780-2057

Daytime Phone #