2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006
Secretary of State

DOCUMENT# G24428

Entity Name: UNITED BATHROOM SYSTEMS, INC.

Current Principal Place of Business:

3731 SW 47TH AVE
SUITE 402
FT LAUDERDALE, FL 33314 US

New Principal Place of Business:

Current Mailing Address:

3731 SW 47TH AVE
SUITE 402
FT LAUDERDALE, FL 33314 US

New Mailing Address:

FEI Number: 59-2760117 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TURNER, CHARLES H
% UNITED BATHROOM SYSTEMS INC
3731 SW 47TH AVE SUITE 402
FT LAUDERDALE, FL 33314 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: PD ( ) Delete
Name: TURNER, CHARLES H
Address: 5028 S.W. 40TH AVE
City-St-Zip: FT LAUDERDALE, FL 33314

Title: VPD ( ) Delete
Name: OVERBEY, GAYLON G
Address: 12126 AMBROSIA COURT
City-St-Zip: JACKSONVILLE, FL 32223

Title: S ( ) Delete
Name: LANGBEIN, DIANA
Address: 516 SW 13TH ST
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: ASD ( ) Delete
Name: OVERBEY, NANCY M
Address: 12126 AMBROSIA COURT
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TURNER, CHARLES H
Address: 4928 WINDWARD WAY
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: VPD (X) Change ( ) Addition
Name: OVERBEY, GAYLON G
Address: 7257 NW 187TH TERRACE
City-St-Zip: ALACHUA, FL 32615

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

Title: ASD (X) Change ( ) Addition
Name: OVERBEY, NANCY M
Address: 7257 NW 187TH TERRACE
City-St-Zip: ALACHUA, FL 32615

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: CHARLES H. TURNER PRES 03/14/2006
Electronic Signature of Signing Officer or Director Date