2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2009
Secretary of State

DOCUMENT# 744350

Entity Name: UPPER ROOM ASSEMBLY, INC.

Current Principal Place of Business:

ATTN: PAT WILLIAMS
19701 SW 127 AVENUE
MIAMI, FL 331771803 US

New Principal Place of Business:

Current Mailing Address:

ATTN: PAT WILLIAMS
19701 SW 127 AVENUE
MIAMI, FL 331771803 US

New Mailing Address:

FEI Number: 59-1889817 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PAINE, EDWARD J
19701 SW 127TH AVE
MIAMI, FL 33177 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

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	KLEPP, BRUCE O	
Address:	15459 SW 143 TERR	
City-St-Zip:	MIAMI, FL 33196	
Title:	D	( ) Delete
Name:	HASSIEN, BRANCH	
Address:	9024 SW 214 STREET	
City-St-Zip:	MIAMI, FL 33177	
Title:	S	( ) Delete
Name:	ACOSTA, MARCOS	
Address:	6151 PARADISE POINT DRIVE	
City-St-Zip:	MIAMI, FL 33157	
Title:	D	( ) Delete
Name:	SHAKES, ROY	
Address:	15115 SW 153 AVE	
City-St-Zip:	MIAMI, FL 33196	
Title:	D	( ) Delete
Name:	PLUMMER, DAWSON	
Address:	10915 SW 177 TERR	
City-St-Zip:	MIAMI, FL 33157	
Title:	D	( ) Delete
Name:	GONZALEZ, JUAN C	
Address:	14121 SW 156 TERR	
City-St-Zip:	MIAMI, FL 33177	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE O. KLEPP REV 05/15/2009
Electronic Signature of Signing Officer or Director — Date