2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007
Secretary of State

DOCUMENT# 847471

Entity Name: UPTRONIX, INC.

Current Principal Place of Business:

296 BELL PARK DR.
WOODSTOCK, GA 30188 US

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 903
WOODSTOCK, GA 30188 US

New Mailing Address:

FEI Number: 58-1411946 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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: SD ( ) Delete
Name: OSTERHOUT, PATRICIA A
Address: 2700 N PENINSULA AVE #332
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: CTD ( ) Delete
Name: GOMMO, WILLIAM F
Address: 2700 N. PENINSULA AVE. #332
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: PD ( ) Delete
Name: GOMMO, PAUL F,
Address: 908 RAVEN POINTE
City-St-Zip: CANTON, GA 30114

Title: V (X) Delete
Name: OVERDORF, DAVID
Address: PO BOX 90142
City-St-Zip: ALLENTOWN, PA 18109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: GOMMO, PAUL F
Address: 908 RAVEN POINTE
City-St-Zip: CANTON, GA 30114

Title: V (X) Change ( ) Addition
Name: OVERDORF, DAVID
Address: PO BOX 90142
City-St-Zip: ALLENTOWN, PA 18109

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: PATRICIA OSTERHOUT SD 03/21/2007

Electronic Signature of Signing Officer or Director Date