

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024036

Entity Name: UNION RICH USA, LLC

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

1301 W. COPANS ROAD
BLDG G; SUITE 9
POMPAÑO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

1301 W. COPANS ROAD
BLDG G; SUITE 9
POMPAÑO BEACH, FL 33064

New Mailing Address:

FEI Number: 41-2133398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLOAN, BARBARA A ESQ.
980 N. FEDERAL HIGHWAY, SUITE 410
BOCA RATON, FL 33432 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILLIAMS TRADING, IN, C.
Address: 1020 S.E. 13TH AVENUE
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGRM () Delete
Name: INFINITY CONSULTING, GROUP, LLC
Address: 1011 TULLAMORE PLACE
City-St-Zip: ALPHARETTA, GA 30022

Title: MGRM () Delete
Name: EFFICIENT FRONTIER C, ONSULTANTCY, I N C.
Address: 2506 EAGLE WATCH LANE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MATT WILLIAMS

PRES

04/28/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date