

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002201

FILED
Apr 04, 2010
Secretary of State

Entity Name: URBAN TRAINING NETWORK, INC.

Current Principal Place of Business:

390 NE 88TH STREET
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 530541
MIAMI, FL 33153

New Mailing Address:

FEI Number: 03-0416196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX TEAM INC
C/O STEVEN DANIELSON
8569 PINES BLVD. STE 214
PEMBROKE PINES, FL 33024 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
Name: CARRINGTON, PATRICK T
Address: 390 NE 88TH STREET
City-St-Zip: MIAMI, FL 33138

Title: D
Name: WILLIAMS, PETRE-ANN
Address: 1380 SW 105 AVE
City-St-Zip: PEMBROKE PINES, FL 33023

Title: D
Name: HORNSBY, RICHARD
Address: 3991 EAST RIDGEVIEW
City-St-Zip: DAVIE, FL 33330

Title: D
Name: LOVELOCK, CHARLES
Address: 3620 6TH AVENUE SE
City-St-Zip: NAPLES, FL 34117

Title: D
Name: MASON, MARION
Address: 9454 SW 146TH AVENUE
City-St-Zip: MIAMI, FL 33186

Title: D
Name: PUGA, EUNICE
Address: 8401 SW 107 AVE. UNIT 229 E
City-St-Zip: MIAMI, FL 33173

I hereby 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 all other like empowered.

SIGNATURE: PATRICK THOMAS CARRINGTON

P

04/04/2010

Electronic Signature of Signing Officer or Director

Date