

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003748

FILED
Apr 24, 2006
Secretary of State

Entity Name: STEP IT UPI, INC.

Current Principal Place of Business:

P.O. BOX 841341
PEMBROKE PINES, FL 33084

New Principal Place of Business:

3300 PEMBROKE RD STE. 846
HOLLYWOOD, FL 33021

Current Mailing Address:

32522 EDGEWATER DR.
MAGNOLIA, TX 77354

New Mailing Address:

P.O. BOX 7304
THE WOODLANDS, TX 77387

FEI Number: 47-0918319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, NICOLE
1545 E. OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33334 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: SMITH, NICOLE
Address: 32522 EDGEWATER DR
City-St-Zip: MAGNOLIA, TX 77354

Title: VP () Delete
Name: HILL, MICHAEL
Address: 1157 N. BOSTON PL
City-St-Zip: TULSA, OK 74106

Title: TRES () Delete
Name: SMITH, REINALDO A JR.
Address: 15115 TRUMPET VINE LANE
City-St-Zip: CYPRESS, TX 77429

Title: SEC () Delete
Name: SMITH, PATRICIA
Address: 32522 EDGEWATER DR
City-St-Zip: MAGNOLIA, TX 77354

Title: GW () Delete
Name: TERRY, SHANCELOR
Address: 12903 BRANT ROCK #740
City-St-Zip: HOUSTON, TX 77082

Title: RESE () Delete
Name: THOMAS, CHARNELL
Address: 131 LINCOLN RD, 4A
City-St-Zip: BROOKLYN, NY 11225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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 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: NICOLE R. SMITH

PRES

04/24/2006

Electronic Signature of Signing Officer or Director

Date