2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011744

Entity Name: URBAN DANCE SYSTEM INC.

FILED Feb 11, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:	
4600 S.W. 19TH STREET WEST PARK, FL 33023					
Current Mailing Address:				New Mailing Address:	
4600 S.W. 19TH STREET WEST PARK, FL 33023			4600 SW 19TH STREET WEST PARK, FL 33023		
FEI Number: 20-5885900 FEI Number Applied For () FEI Num			nber Not Applicable()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
LANE, GARNIKA 4600 S.W. 19TH STREET WEST PARK, FL 33023 US			LANE-PIERRE, GARNIKA 4600 S.W. 19TH STREET WEST PARK, FL 33023 US		
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: GARNIKA LANE-PIERRE					02/11/2008
	Electronic	Signature of Registered Agen	t		Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCEO () E LANE, GARNIKA P. O. BOX 22015 HOLLYWOOD, F	7		Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	PO (X) I PARK, MARY S 4750 SW 21ST S WEST PARK, FL			Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D () E PIERRE, PETER 4600 S.W. 19TH WEST PARK, FL			Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D () E PIERRE, ELOISE 500 THIRD ISLAN HALLANDALE BE	ID BLVD.		Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D (X) I LANE-SADLER, E 4800 S.W. 36TH PEMBROKE PINE	COURT		Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D ()E EDWARDS, DAN 2701 WILEY STR HOLLYWOOD, F	REET		Title: () Name: Address: City-St-Zip:	Change () Addition

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: GARNIKA LANE-PIERRE PCEO 02/11/2008