## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000000970

**Entity Name:** UNIVERSITY HEALTH INDUSTRIES, INC.

FILED Mar 24, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

950 PENINSULA CORPORATE CIRCLE, SUITE 3022 BOCA RATON, FL 33487

**Current Mailing Address: New Mailing Address:** 

950 PENINSULA CORPORATE CIRCLE, SUITE 3022 BOCA RATON, FL 33487

FEI Number: 65-1081054 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THEODORE, GEORGE 950 PENINSÚLA CORPORATE CIRCLE **SUITE 3022** 

SUITE 3022

BOCA RATON, FL 33487 US BOCA RATON, FL 33487 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.

MORROW, JARRET

950 PENINSULA CORPORATE CIRCLE

SIGNATURE: JARRET MORROW 03/24/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution (X).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: CFO (X) Change ( ) Addition

LIVINGSTON, DAVID Name: Name: PELOSO, DEAN

7224 HILLSIDE DRIVE, SUITE 5 950 PENINSULA CORP CIRCLE, SUITE 3022 Address: Address:

City-St-Zip: HOLLYWOOD, CA 90046 City-St-Zip: BOCA RATON, FL 33487

Title: () Delete Title: ( ) Change (X) Addition

MORROW, JARRET Name: Name:

Address: 950 PENINSULA CORP CIRCLE, SUITE 3022 Address:

BOCA RATON, FL 33487 City-St-Zip: City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JARRET MORROW **PRES** 03/24/2008

Electronic Signature of Signing Officer or Director

Date