2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 02, 2007
Secretary of State

DOCUMENT# P01000052145

Entity Name: UNITED DISPENSER SERVICES, INC.

Current Principal Place of Business:

6500 NW 16TH STREET
SUITE # 2
PLANTATION, FL 33313

New Principal Place of Business:

Current Mailing Address:

6500 NW 16TH STREET
SUITE # 2
PLANTATION, FL 33313

New Mailing Address:

FEI Number: 59-3721030 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PD ( ) Delete
Name: ANGSTADT, RODNEY J
Address: 6500 NW 16TH STREET SUITE # 2
City-St-Zip: PLANTATION, FL 33313

Title: VTD ( ) Delete
Name: FAY, DAVID A
Address: 6500 NW 16TH STREET SUITE # 2
City-St-Zip: PLANTATION, FL 33313

Title: V ( ) Delete
Name: DAVID, MOHAMMED T
Address: 6500 NW 16TH STREET SUITE # 2
City-St-Zip: PLANTATION, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDTD (X) Change ( ) Addition
Name: FAY, DAVID A
Address: 6500 NW 16TH STREET SUITE # 2
City-St-Zip: PLANTATION, FL 33313

Title: V (X) Change ( ) Addition
Name: MOHAMMED, DAVID T
Address: 6500 NW 16TH STREET SUITE # 2
City-St-Zip: PLANTATION, FL 33313

Title: S (X) Change ( ) Addition
Name: VARGAS, LINDA
Address: 6500 NW 16TH STREET SUITE # 2
City-St-Zip: PLANTATION, FL 33313

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: DAVID A. FAY PDTD 07/02/2007

Electronic Signature of Signing Officer or Director — Date