## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000040165

Entity Name: UM INVESTMENT, INC.

FILED Jan 21, 2005 Secretary of State

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

11337 NW 46TH LANE 6318 ETHAN DRIVE MIAMI, FL 33178 LAKEWORTH, FL 33467

Current Mailing Address: New Mailing Address:

11337 NW 46TH LANE 6318 ETHAN DRIVE MIAMI, FL 33178 LAKEWORTH, FL 33467

FEI Number: 03-0427733 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MURSULI, UBALDO
11337 NW 46TH LANE
MIAMI, FL 33178 US

MURSULI, UBALDO
6318 ETHAN DRIVE
LAKEWORTH, FL 33467 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: UBALDO MURSULI 01/21/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MURSULI, UBALDO
 Name:
 MURSULI, UBALDO

 Address:
 11337 NW 46TH LANE
 Address:
 6318 ETHAN DRIVE

Address: 11337 NVV 461H LANE Address: 6318 ETHAN DRIVE
City-St-Zip: MIAMI, FL 33178 City-St-Zip: LAKEWORTH, FL 33467

Title: ( ) Delete Title: VPD ( ) Change (X) Addition Name: ARAGON, AREANNE M

Address: Address: 6318 ETHAN DRIVE
City-St-Zip: City-St-Zip: LAKEWORTH, FL 33467

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

 Name:
 Name:
 ANREUS-HALL, LUCIA

 Address:
 Address:
 6318 ETHAN DRIVE

 City-St-Zip:
 City-St-Zip:
 LAKEWORTH, FL 33467

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

 Name:
 Name:
 HALL, TIMOTHY T

 Address:
 Address:
 6318 ETHAN DRIVE

 City-St-Zip:
 City-St-Zip:
 LAKEWORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: UBALDO MURSULI PD 01/21/2005