2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2007 08:00 A Secretary of State **DOCUMENT # P02000060967** 1. Entity Name UBM BEVERAGE INC. Principal Place of Business Mailing Address 5855 PLACIDA RD 5855 PLACIDA RD ENGLEWOOD, FL 34224 ENGLEWOOD, FL 34224 04152007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 36-4503519 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PATEL, USHA A DO NOT WRITE 5855 PLACIDA RD #406 ENGLEWOOD, FL 34224 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little if applicable, (NOTE: Registered Agent signature required when remistating) DATE 000000733926 9. Election Campaign Financing \$5.00 May Be 05/09/07-80102-025 150.00 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME PATEL, USHA A STREET ADDRESS 5855 PLACIDA RD #406 CITY-ST-ZIP ENGLEWOOD, FL 34224 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP