

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000115432

Entity Name: UBU, INC.

FILED
Sep 19, 2006
Secretary of State

Current Principal Place of Business:

523 HUXFORD CT
LAKE MARY, FL 32746

New Principal Place of Business:

2130 WEST POTOMAC
UNIT 1
CHICAGO, IL 60622

Current Mailing Address:

523 HUXFORD CT
LAKE MARY, FL 32746

New Mailing Address:

2130 WEST POTOMAC
UNIT 1
CHICAGO, IL 60622

FEI Number: 20-0226220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, GINA M
523 HUXFORD CT
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

JONES, GINA M
523 HUXFORD COURT
LAKE MARY, FL 32746 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: GINA M.JONES

09/19/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, GINA M
Address: 523 HUXFORD CT
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, GINA M
Address: 2130 WEST POTOMAC
City-St-Zip: CHICAGO, IL 60622

I hereby certify that the information supplied with this filing does not qualify for the 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: GINA M.JONES

PRES

09/19/2006

Electronic Signature of Signing Officer or Director

Date