2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028885

City-St-Zip: MIAMI, FL 33157

Entity Name: URBAN GROWTH DEVELOPMENT CORPORATION

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
18440 SW MIAMI, FL	78TH PLACE 33157			
Current Mailing Address:			New Mailing Address:	
18440 SW MIAMI, FL	78TH PLACE 33157			
FEI Number	: 05-0559176	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address of	f New Registered Agent:
	RD, JOHNNY . 194TH STRE 33056 US	ET		
The above in the State	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATUI	RE:			
	Electror	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	T,D (WOODARD, JO 1725 N.W. 194 MIAMI, FL 330	TH STREET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P,D (WATSON, EOL 18440 SW 78T MIAMI, FL 331	H PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V,D (WOODARD, DI 1725 N.W. 194 MIAMI, FL 330	TH STREET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	S,D () WATSON, WIL 18440 SW 78T		Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: EOLINE WATSON P'D 04/27/2007