## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000101405

10562 WASATCH BLVD

SANDY, UT 84092

Address:

City-St-Zip:

FILED Mar 10, 2009 Secretary of State

Entity Name: U.B. ENGINEERING, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10562 WA SANDY, U	SATCH BLVD T 84092				
Current Mailing Address:			New Mailing Address:		
10562 WA SANDY, U	SATCH BLVD T 84092				
FEI Number:	20-0287577	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
OJUKWV, VIRGINIA 6145 NATIVE WOODS DR. TAMPA, FL 33625 US			BECKSTRAND, CHRI 13054 SOCIAL LANE WINTER GARDEN, F		
	named entity : e of Florida.	submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: CHRISTOPHER BECKSTRAND				03/10/2009	
	Electror	nic Signature of Registered Age	nt	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) REECE, GUS F 11877 N. ATHE HIGHLAND, UT	NA DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( ) REECE, GINGE 11877 N. ATHE HIGHLAND, UT	NA DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ) PEARCE, TREI 10562 WASATO SANDY, UT 84	CH BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	T ( ) PEARCE, AUBI	) Delete REY	Title: Name:	( ) 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.

Address:

City-St-Zip:

SIGNATURE: GUS RYAN REECE Ρ 03/10/2009