2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104022

FILED May 06, 2008 Secretary of State

Entity Name: URBANTHOUGHT, INC. **Current Principal Place of Business: New Principal Place of Business:** 7707 WISCONSIN AVE **APT 806** BETHESDA, MD 20814 **New Mailing Address: Current Mailing Address:** 7707 WISCONSIN AVE PO BOX 17598 ECM#56124 APT 806 BETHESDA, MD 20814 BALTIMORE, MD 21297 FEI Number: 51-0515002 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: GLAZER, AARON 19802 OLD BELLAMY ROAD ALACHUA, FL 32615 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVST** () Delete () Change () Addition GLAZER, AARON Name: Name: 19802 OLD BELLAMY ROAD Address: Address: City-St-Zip: ALACHUA, FL 32615 City-St-Zip: () Delete Title: Title: () Change () Addition Name: GLAZER, AARON Name: 19802 OLD BELLAMY ROAD Address: Address: ALACHUA, FL 32615 City-St-Zip: City-St-Zip:

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.

SIGNATURE: AARON GLAZER PRES 05/06/2008