## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000098148

Entity Name: UBER PROMOTIONS INC

FILED Apr 30, 2008 Secretary of State

Durrent Principal Place of Business: New Principal Place of Busines	t Principal Place of Business:	New Principal Place of Busines
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3324 W UNIVERSITY AVE 4010 W NEWBERRY RD #277 SUITE A GAINESVILLE, FL 32607 GAINESVILLE, FL 32607

Current Mailing Address: New Mailing Address:

3324 W UNIVERSITY AVE 4010 W NEWBERRY RD #277 SUITE A GAINESVILLE, FL 32607 GAINESVILLE, FL 32607

FEI Number: 20-5402746 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and

Name and Address of New Registered Agent:

FRIEDMAN, JEFFREY CPA 1 SW 129 AVE SUITE 408 PEMBROKE PINES, FL 33027 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete Title: PRES (X) Change ( ) Addition

Name: FRIEDMAN, JOEY Name: FRIEDMAN, JOEY
Address: 3324 W UNIVERSITY AVE #277 Address: 4010 W NEWBERRY RD, SUITE A

City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32607

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

Name: FARZAD, MICHAEL Name: FARZAD, MICHAEL

Address: 3324 W UNIVERSITY AVE #277 Address: 4010 W NEWBERRY RD, SUITE A City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32607

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: JOEY FRIEDMAN PRES 04/30/2008