2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000029510

Entity Name: UNLIMITED TECHNICAL SUPPORT INC.

6541 COW PEN RD APT F104

MIAMI LAKES, FL 33014

Address:

City-St-Zip:

FILED Sep 09, 2008 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|--|--|---|-------------|---|--|--|
| 6541 COW PEN RD APT F104 MIAMI LAKES, FL 33014 | | | | 11145 SW 6TH STREET #303 PEMBROKE PINES, FL 33026 | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| 6541 COW PEN RD APT F104 MIAMI LAKES, FL 33014 | | | | 11145 SW 6TH STREET #303 PEMBROKE PINES, FL 33026 | | |
| FEI Number | : 20-8914254 | FEI Number Applied For () | FEI Nun | nber Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| The above | V PEN RD KES, FL 33014 | | urpose o | f changing its registered | d office or registered agent, or both, | |
| SIGNATUI | RE: | | | | | |
| | Electron | ic Signature of Registered Age | nt | | Date | |
| | | 8(2)(b), F.S., the corporation did no Trust Fund Contribution (). | t receive t | he prior notice. | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P () FERTIL, JERRY 6541 COW PEN MIAMI LAKES, I | I RD APT F104 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP () FERTIL, ALEXA 6541 COW PEN MIAMI LAKES, F | I RD APT F104 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | D () BROWN, SONY | Delete A | | 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: SONYA BROWN D 09/09/2008