2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008
Secretary of State

DOCUMENT# P94000058885

Entity Name: UNIVERSAL FIBER OPTICS, INC.

Current Principal Place of Business:

1019 E. ALTAMONTE DR
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

201 HAMLIN DRIVE
FERN PARK, FL 32730 US

Current Mailing Address:

931 N. STATE RD 434
PMB 188 SUITE 1201
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

931 N. STATE RD 434
PMB 188, SUITE 1201
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3263668 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HYDE, FRANCES M
112 CHERRY HILL CIRCLE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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:

Title: PDC ( ) Delete
Name: LABIB, FARAH J
Address: 204 GREEN LAKE CIR
City-St-Zip: LONGWOOD, FL 32779

Title: VTD ( ) Delete
Name: HYDE, BARRY J
Address: 204 GREEN LAKE CIRCLE
City-St-Zip: LONGWOOD, FL 32779

Title: VSD ( ) Delete
Name: PASSARELLI, JOSEPH H
Address: 9550 CYPRESS PINE ST
City-St-Zip: ORLANDO, FL 32827

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: FARAH J LABIB PDC 01/31/2008

Electronic Signature of Signing Officer or Director Date