## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000084200

Entity Name: UNITED GLOBAL CONSULTING CORP.

FILED Jan 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** ONE TAMPA CITY CENTER ONE TAMPA CITY CENTER SUITE 1825 **SUITE 1825** TAMPA, FL 33602 TAMPA, FL 33602 **Current Mailing Address:** New Mailing Address: ONE TAMPA CITY CENTER ONE TAMPA CITY CENTER **SUITE 1825** SUITE 1825 TAMPA, FL 33602 TAMPA, FL 33602 US FEI Number: 59-3349045 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GIBBONS, TUCKER, MILLER, WHATLEY & STEIN GIBBONS, TUCKER, MILLER, WHATLEY & STEIN 101 E. KENNEDY BLVD. 101 E. KENNEDY BOULEVARD SUITE 2190 **SUITE 2190** TAMPA, FL 33602 US TAMPA, FL 33602 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: 01/29/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition SCHMITZ, WIDO F SCHMITZ, WIDO F PDT Name: Name: 6410 RENWICK CIRCLE 6410 RENWICK CIRCLE Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647 US VΡ Title: VΡ Title: ( ) Delete (X) Change ( ) Addition Name: RICKENBACHER, URS M Name: RICKENBACHER, URS M VP BAHNNOF STRASSE 9/10 BAHNHOF STRASSE 9/10 Address: Address: LYSS, SWITZERLAND, CH 3250 LYSS, SWITZERLAND, CH CH 3250 SW City-St-Zip: City-St-Zip: ( ) Change (X) Addition Title: Title: () Delete N/A NONE, NONE Name: Name: N/A Address Address: City-St-Zip: City-St-Zip: N/A, N 00000 N Title: () Delete Title: N/A ( ) Change (X) Addition NONE, NONE Name: Name: Address: Address: N/A City-St-Zip: City-St-Zip: N/A, N 00000 N Title: Title: ( ) Change (X) Addition N/A ( ) Delete NONE, NONE Name: Name: Address: Address: N/A City-St-Zip: City-St-Zip: N/A, N 00000 N ( ) Change (X) Addition Title: () Delete Title: N/A Name: Name: NONE, NONE Address: Address: N/A City-St-Zip: City-St-Zip: N/A. N 00000 N

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: WIDO F. SCHMITZ PTD 01/29/2009