

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 04 1996 8:00 am
Secretary of State

DOCUMENT # 696455 (5)

1. Corporation Name
UNIVERSAL TRAVEL SERVICES, INC.



Principal Place of Business: **2848 5TH AVE. NO. ST. PETERSBURG FL 33713**
Mailing Address: **2848 5TH AVE. NO. ST. PETERSBURG FL 33713**

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
25		30	

3. Date Incorporated or Qualified 07/29/1981	3a. Date of Last Report 04/10/1995
4. FEI Number 59-2111217	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

RAY M WATSON
1355 PINELLAS BAYWAY #4
TIERRA VERDE FL 33715

81	Name	
82	Street Address (P.O. Box Number is Not Acceptable)	
83		
84	City	
		FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP
DTS	WATSON, LOIS U.	1355 PINELLAS PARKWAY #4	TIERRA VERDE FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
DV	LARMON, JOE S	4342 HAINES RD NORTH	ST PETERSBURG, FL 00000	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
DV	BOLICH, DONALD	1136 BIRDIE ROAD	BROOMFIELD, CO 00000	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
DP	WATSON, RAY M	1355 PINELLAS BAYWAY #4	TIERRA VERDE FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(h), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Lois U. Watson* **Lois U. WATSON** **4/01/96** **813-323-3371**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)