

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
BUREAU OF CORPORATIONS

19965-1-96 B-6316 C

DOCUMENT # **H31600 (0)**

1. Corporation Name  
**UCS, INC.**



Principal Place of Business

**2005 NW 62ND STREET  
SUITE # 1  
FT. LAUDERDALE FL 33309**

Mailing Address

**2005 NW 62ND STREET  
SUITE # 1  
FT. LAUDERDALE FL 33309**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, et.

26 State, Apt. #, et.

22 City & State

27 City & State

23 Zip

28 Zip

24 County

29 County

9. Name and Address of Current Registered Agent

**RAMOS, O.F.  
14020 CARLTON DRIVE  
DAVIE FL 33330**

3. Date Incorporated or Qualified

**11/28/1984**

3a. Date of Last Report

**04/17/1995**

4. FCI Number

**59-2486196**

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**

6. Election, Copyright Filing, Trust Fund Contribution

**\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes  No

10. Name and Address of New Registered Agent

81 Name  
**Dania Ramos**  
82 Street Address (P.O. Box Numbers Not Acceptable)  
**20201 NW 7th Street**  
83 City  
**Pembroke Pines**  
84 FL 85 Zip Code  
**33029**

11. Pursuant to the provisions of Sections 607.021 and 607.0215, 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 a change to the corporation's board of directors, friendly, accept the appointment as registered agent. I am familiar with and accept the original terms of the new office.

SIGNATURE *Dania Ramos*

OFFICERS AND DIRECTORS

ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN:

DATE

12. OFFICERS AND DIRECTORS

1. TITLE: PD  
2. NAME: RAMOS, O. F.  
3. STREET ADDRESS: 2130 NW 82ND TERRACE  
4. CITY, ST., ZIP: SUNRISE FL

5. TITLE: VS  
6. NAME: NORTH, WILLIAM KNOX  
7. STREET ADDRESS: 2130 N.W. 82ND TERRACE  
8. CITY, ST., ZIP: SUNRISE FL

9. TITLE: T  
10. NAME: RAMOS, DANIA  
11. STREET ADDRESS: 20201 NW 7TH STREET  
12. CITY, ST., ZIP: PEMBROKE PINES FL

13. TITLE: [ ] DELETE  
14. NAME: [ ] DELETE  
15. STREET ADDRESS: [ ] DELETE  
16. CITY, ST., ZIP: [ ] DELETE

17. TITLE: [ ] DELETE  
18. NAME: [ ] DELETE  
19. STREET ADDRESS: [ ] DELETE  
20. CITY, ST., ZIP: [ ] DELETE

21. TITLE: [ ] DELETE  
22. NAME: [ ] DELETE  
23. STREET ADDRESS: [ ] DELETE  
24. CITY, ST., ZIP: [ ] DELETE

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN:

1. TITLE: [ ] Change [ ] Addition  
2. NAME: [ ] Change [ ] Addition  
3. STREET ADDRESS: 14020 Carlton Drive  
4. CITY, ST., ZIP: Davie, FL 33330

5. TITLE: [ ] Change [ ] Addition  
6. NAME: [ ] Change [ ] Addition  
7. STREET ADDRESS: (zip) 33322

8. TITLE: [ ] Change [ ] Addition  
9. NAME: [ ] Change [ ] Addition  
10. STREET ADDRESS: (zip) 33029

11. TITLE: [ ] Change [ ] Addition  
12. NAME: [ ] Change [ ] Addition  
13. STREET ADDRESS: [ ] Change [ ] Addition  
14. CITY, ST., ZIP: [ ] Change [ ] Addition

15. TITLE: [ ] Change [ ] Addition  
16. NAME: [ ] Change [ ] Addition  
17. STREET ADDRESS: [ ] Change [ ] Addition  
18. CITY, ST., ZIP: [ ] Change [ ] Addition

19. TITLE: [ ] Change [ ] Addition  
20. NAME: [ ] Change [ ] Addition  
21. STREET ADDRESS: [ ] Change [ ] Addition  
22. CITY, ST., ZIP: [ ] Change [ ] Addition

14. I, Dania Ramos, certify that the information supplied by me is true and correct to the best of my knowledge and belief, and I am not a party to the exemption statement in Section 119.07(3)(b), Florida Statutes. I further certify that the information is not false, and I am not a party to the exemption statement in Section 119.07(3)(b), Florida Statutes. I further certify that I am an officer or director of the corporation, or the registered agent, and that my signature shall have the same legal effect as if made under oath. This report is required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or Chapter 607 as an attachment with an address.

SIGNATURE: *Dania Ramos* Dania Ramos 4/25/96 (954)771-8116  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)