

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000075868

Entity Name: ULLIX, INC.

FILED
Jun 25, 2004
Secretary of State

Current Principal Place of Business:

3970 NW 132 ST
A
OPA LOCKA, FL 33054

Current Mailing Address:

3970 NW 132 ST
A
OPA LOCKA, FL 33054

New Principal Place of Business:

13899 BISCAYNE BLVD.
310
NORTH MIAMI BEACH, FL 33181

New Mailing Address:

13899 BISCAYNE BLVD
310
NORTH MIAMI BEACH, FL 33181

FEI Number: 65-1031436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORR, ULRIKE
3970 NW 132 ST
A
OPA LOCKA, FL 33054

Name and Address of New Registered Agent:

PORR, ULRIKE
13899 BISCAYNE BLVD
310
NORTH MIAMI BEACH, FL 33181

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:

06/25/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ULRIKE, PORR
Address: 3970 NW 132 ST #A
City-St-Zip: OPA LOCKA, FL 33054

Title: VPS () Delete
Name: GELPI, SILVANA
Address: 4079 PINWOOD LANE
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: ULRIKE, PORR
Address: 13899 BISCAYNE BLVD # 310
City-St-Zip: NORTH MIAMI BEACH, FL 33181

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ULRIKE PORR

PT

06/25/2004

Electronic Signature of Signing Officer or Director

Date