

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121278

FILED  
Mar 15, 2004  
Secretary of State

Entity Name: UNIVERSAL ASSOCIATES, INC.

**Current Principal Place of Business:**

5100 N A1A, E-50  
VERO BEACH, FL 32963

**New Principal Place of Business:**

4275 69TH ST.  
VERO BEACH, FL 32967

**Current Mailing Address:**

5100 N A1A, E-50  
VERO BEACH, FL 32963

**New Mailing Address:**

PO BOX 3029  
VERO BEACH, FL 32964

FEI Number: 01-0560688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALVAREZ, JOE A  
5100 N A1A, E-50  
VERO BEACH, FL 32963

**Name and Address of New Registered Agent:**

ALVAREZ, JOE A  
4275 69TH ST.  
VERO BEACH, FL 32967

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

03/15/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ALVAREZ, JOE A  
Address: PO BOX 3029  
City-St-Zip: VERO BEACH, FL 32964

Title: P ( ) Delete  
Name: ALVAREZ, SHERRY  
Address: PO BOX 3029  
City-St-Zip: VERO BEACH, FL 32964

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: JOE A. ALVAREZ

Electronic Signature of Signing Officer or Director

P

03/15/2004

Date