2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104494

City-St-Zip:

Entity Name: LINIVERSAL RISK SOLLITIONS INC

FILED Aug 19, 2004 Secretary of State

Entity Name: UNIVER	SAL RISK SOLUTIONS, INC.			
Current Principal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
848 BRICKELL AVE., S MIAMI, FL 33131	UITE 1235			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
848 BRICKELL AVE., S MIAMI, FL 33131	UITE 1235			
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
CORP WIZ REGISTER 8300 NW 53RD ST., SL MIAMI, FL 33166 US	JITE 308			
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: (Name: Address:) Delete	Name: GILLARD, KE) Change (X) Addition RRY S MR	

City-St-Zip: MIAMI, FL 33131 US

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: KERRY GILLARD P 08/19/2004