

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000059212

FILED
Apr 28, 2004
Secretary of State

Entity Name: UNIVERSAL FLORIDA INSURANCE AGENCY, INC.

Current Principal Place of Business:

2875 NE 191ST ST
STE 300
MIAMI, FL 33180

New Principal Place of Business:

Current Mailing Address:

2875 NE 191ST ST
STE 300
MIAMI, FL 33180

New Mailing Address:

FEI Number: 65-0847905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, TRAVIS L
106 E COLLEGE AVE, SUITE 1200
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MEIER, BRADLEY I
Address: 2875 NE 191 ST #300
City-St-Zip: MIAMI, FL 33180

Title: D () Delete
Name: MEIER, NORMAN M
Address: 19355 NE 36TH CT
City-St-Zip: MIAMI, FL 33180

Title: D () Delete
Name: SLOGOFF, REED J
Address: 233 SOUTH 6TH ST APT 812-II
City-St-Zip: PHILADELPHIA, PA 19106

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BRADLEY I. MEIER

D

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date