2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # M03000003892

1. Entity Name
UNIVERSAL DATA SERVICES, LLC

Principal Place of Business	Mailing Address
2261 COSMOS COURT SUITE 150 CARLSBAD, CA 92009	2261 COSMOS COURT SUITE 150 CARLSBAD, CA 92009

DO NOT WRITE IN THIS SPACE

03102004 No Chg-LLC CR2E083 (10/03)

4. FEI Number
82-0546774
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LOSER, JAMES WESLEY
STREET ADDRESS	2261 COSMOS COURT
CITY-ST-ZIP	CARLSBAD, CA 92009
TITLE	MGRM
NAME	JANNI, THOMAS HENRY
STREET ADDRESS	2261 COSMOS COURT
CITY-ST-ZIP	CARLSBAD, CA 92009
TITLE	
NAME	
STREET ADDRESS	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: James W. Loser Member March 25, 2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #