

DOCUMENT # 181071

1. Entity Name

UNIVERSAL ENTERPRISES, INC.

1/16

FILED
Feb 15, 2001 8:00 am
Secretary of State

01-16-2001 90100 043 ***150.00

Principal Place of Business

1351 SW 141 AVE
 G-301
 PEMBROKE PINES FL 33027
 US

Mailing Address

1351 SW 141 AVE
 G-301
 PEMBROKE PINES FL 33027
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-6077959

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WOLLONICK, PATRICIA
 1351 SW 141 AVE
 G-301
 PEMBROKE PINES FL 33027

7. Name and Address of New Registered Agent

Name WOLLOWICK, PATRICIA
 Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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.

SIGNATURE Patricia Wollonick PP

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-06-01

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐ **\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D	TESHER, ROBERT	2000 S.OCEAN BLVD., APT 6E BOCA RATON FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	SD	WOLLOWICK, JANET AMY	1051 NW 124TH AVE PEMBROKE PINES FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	PD	WOLLOWICK, PATRICIA	1351 SW 141ST AVE., BLDG G APT 301 PEMBROKE PINES FL 33027	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

13. 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 or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia Wollonick

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-01-01 954-450-1485

Date

Daytime Phone #

CR2E034 (10/00)