2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 246771

1. Entity Name
UNIVERSAL PRINTING COMPANY

Principal Place of Business	Mailing Address
3100 N.W. 74TH AVE. MIAMI, FL 33122	3100 N.W. 74TH AVE. MIAMI, FL 33122

DO NOT WRITE IN THIS SPACE

01162006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-0937098
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

NICOL, R. JACK
3100 N.W. 74TH AVE.
MIAMI, FL 33122

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	NICOL, R. JACK
STREET ADDRESS	6830 N. SAINT ANDREWS DR.
CITY-ST-ZIP	HIALEAH, FL 33015
TITLE	PD
NAME	SMITH, T. DARRELL
STREET ADDRESS	12632 OAK HOLLOW COURT
CITY-ST-ZIP	DADE CITY, FL 33525
TITLE	D
NAME	SAND, DAVID A
STREET ADDRESS	660 BOUNDARY STREET S.W.
CITY-ST-ZIP	CONOVER, NC 28613
TITLE	D
NAME	ORTH, SCOTT A
STREET ADDRESS	1163 - 71ST STREET
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/30/06-80030-022 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jack Nicol 1-17-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #