

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 351407

FILED
Feb 07, 2006
Secretary of State

Entity Name: UNIVERSAL ERECTORS INC

Current Principal Place of Business:

5208 ST PAUL STREET
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2545
BRANDON, FL 335092545

New Mailing Address:

FEI Number: 59-1258696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOBBS, GEORGE
2315 SYDNEY DOVER ROAD
DOVER, FL 335276442 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: PD () Delete
Name: HOBBS, GEORGE A
Address: 2315 SYDNEY-DOVER
City-St-Zip: DOVER, FL 33527

Title: SD () Delete
Name: HOBBS, JONATHAN W
Address: 18440 DORMAN RD.
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD (X) Change () Addition
Name: HOBBS, GEORGE A
Address: 2315 SYDNEY-DOVER
City-St-Zip: DOVER, FL 33527

Title: PD (X) Change () Addition
Name: HOBBS, JONATHAN W
Address: 18440 DORMAN RD.
City-St-Zip: LITHIA, FL 33547

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JONATHAN W. HOBBS

PRES

02/07/2006

Electronic Signature of Signing Officer or Director

Date