2606 FOR PROFIT CORPORATION ANNUAL REPORT (AR)					FILED Apr 12, 2006 8:00 am			
DOCUME	NT # 383515				Secretary of State 04-12-2006 90104 046 ***150.00			
UNITED TELESERVICES, INC.					04-12-200	6 90104 046 ***1	50.00	
Principal Place of B	usiness	Mailing Address						
1811 79TH ST. N.W. BRADENTON FL 34209		1811 79TH ST. N.W. BRADENTON FL 34209						
2. Principal Place of Business 6206 CULUMBIA Dr Suite, Apt. #, etc.		3. Mailing Address 6206 COlumbia Dr. Suite, Apt. #, etc.		۲ ،	1st MOORE	CR2E034 (10)/05)	
Bradenton, FL 34207		Bradenton, FC		4.	4. FEI Number 59-1349617 Applied For Not Applicable			
34207-	Country MUNATE Name and Address of Current F	34207	Manato		Certificate of Status De	Fee'	75 Additional Required	
SINGLE 1811 79	TARY, WILLIAM G TH ST. N.W. ITON FL 34209	Name Willi			7. Name and Address of New Registered Agent Am G, SINGLETARY P.O. Box Number is Not Acceptable) COLUMBIA Dr			
				raden	tor,	FL g	Zip Code 34207	
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 Welling Group Signature, typed or printed name of registered agent and two if applicable (NOTE Registered Agent signature required when reinstating) DATE DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State						Campaign Financing nd Contribution.	\$5.00 May Be Added to Fees	
	OFFICERS AND E		11. TIFLE	<u>م</u>	DDITIONS/CHANGES		ECTORS IN 11 Change D Addition	
NAME SING	LETARY, W G 79TH ST NW DENTON FL 34209		NAME STREET ADORESS CITY- ST- ZIP	ن الأن د عام الم مرا	and the	aletary va Dr. 24107	Bilange D Augmon	
STREET ADDRESS 1811	GLETARY, C E 79TH ST. N.W. DENTON FL 34209	Delete	TIFLE NAME STREET ADDRESS CITY - ST - ZIP	6204	lace E. JIN 6 Culumbi 6 puter, FC	41=TARy 4 Dr. 34207	Change 🔲 Addition	
STREET ADDRESS 0183	CK_RUBERT A 55 SPRING LAKE RD TLAND PARK FL	Delete	TITLE NAME STREET ADDRESS CHTY-ST-ZIP				Change 🗌 Addition	
STREET ADDRESS 1322	E, HAL J 26 113TH AVE N GO FL	🗋 Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP				Change 🔲 Addition	
IITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change 🗔 Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 tike empowered.								
SIGNATURE: William G. Signature of Signing officer of Director Date Daytone Printed NAME of Signing officer of Director Date Daytone #								