FILED Jul 25, 2006 8:00 am Secretary of State 05-22-2006 90046 023 ***550.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

1.15

DOCUMENT # 682152 1. Entity Name UNIVERSAL TRANSACTIONS CORPORATION				00088100	
Principal Place of Business Mailing Address 8200 N₩ 93RD ST 8200 NW 93RD ST MIAMI, FL 33166 MIAMI, FL 33166			FERNON BING FRING HOME HOME INCH AND THE FISH SIGN GLOW GIRL SIGN SIGN FOR		
DO NOT WRITE IN THIS SPACE				05012006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 59-2050693 Nut Applicable 5. Certificate of Status Desired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				, an ucdainer	
EPSTEIN EDWARD 10598 STONEBRIDGE BLVD. SUITE 608 BOCA RATON, FL 33498				DO NOT WRITE IN THIS SPACE	
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					
FILE NOWIII FEE IS \$550.00 Due by September 6, 2006 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution					
10.	OFFICERS AND DI	RECTORS			
NAME STREET ADDRESS CITY-ST-ZIP	EPSTEIN, ANDREW 103 FOX HEDGE ROAD SADDLE RIVER, NJ 07458				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 00000,				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD EPSTEIN, LAWRENCE 134 OXFORD DRIVE TENAFLY, N.		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EPSTEIN, MARK STONE TOWER DRIVE ALPINE, N.			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 00000,				
TITLE NAME STREET ADDRESS CITY+ST-ZIP	TENAFLY, N.				
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 bath; 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 epidress, with all other like empowered.					
SIGNATURE: LOLLY 23 dem LAM Epoten 7/16/06 973-589-5693					