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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

(5)

FILED Feb 19 1998 8:00am Secretary of State

UNIVE	rsal trave	EL SERVICES, IN	U.						
Principal Plac	e of Business	<u></u>	Mailing Address				-	iai Aldia Aidia Ailii	
2848 5TH AV		2848 5TH AVE. NO.							
ST. PETERSBURG FL 33713 ST. PETERSBURG FL 3371					3		DO NOT WRITE IN	THIS SPACE	
							3. Date Incorporated or Qualified		
							07/29/1981		
2. Principal P	Place of Business	3	2a. Mailing Address				4. FEI Number		Applied For
21			26				59-2111217		Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required
City & Stat			City & State				A Flatia Compine Singular	 -	
23			28				6, Election Campaign Financing Trust Fund Contribution		DO May Be ed to Fees
Zip		Country	Zip	Cour	ntry		8. This corporation owes or has paid the		
24	25	·	29	30	Ť		Personal Property Tax due June 30.	Yes	□ No
		d Address of Current					10. Name and Address of New Regist	ered Agent	
RA	Y M WATSON				81 Nam	e			
1355 PINELLAS BAYWAY #4					82 Strei	et Addre	dress (P.O. Box Number is Not Acceptable)		
TIERRA VERDE FL 33715				Į					
				ļ	83				
				-	84 City			85 Z	ip Code
		10 : 007.0500	1007 1500 51 11 61				4 10 10 10 10 10 10 10 10 10 10 10 10 10	FL °° '	
11. Pursuant office or r	to the provisions registered agent,	of Sections 607.0502 , or both, in the State o	and 607.1508, Florida Stat u If Florida. Such change was	utes, the ab s authorized	ove-name I by the c	ed corpo orporatio	ration submits this statement for the purp in's board of directors. I hereby accept th	ose or changin e appointment	g its registered as registered
agent. I a	m familiar with, a	and accept the obligat	ions of, Section 607.0505, F	Florida Statu	ites.				
SIGNATURE	Signature, typed or pr	inted name of registered agent	and little if applicable 4NC	OTE Registered	Agent signal	ure required	J when reinstating)	ATE	
12.	organical, types or pr	OFFICERS AND		13.	- gone o grice	0.0.040	ADDITIONS/CHANGES TO OFFICER		ORS IN 12
TITLE	DTS		DELETE	1.1 ТІТ	LE			Chang	
NAME	WATSON, L	lois u.		1.2 NA	ME				3
STREET ADDRESS	1355 PINEL	Las Parkway #4		1.3 STF	REET ADDRES	s			2
CITY-ST-ZIP	TIERRA VEI	RDE FL		1.4 CIT	Y-ST-ZIP				[နို
TITLE	DV		☐ DELETE	2.1 TITI	LE				
NAME	LARMON, J					1	V	Chang	ge 🔲 Addition 🕻
STREET ADDRESS				2.2 NA		L	ARMON, JOE S	Chang	ge
CITY-ST-ZIP		ES RD NORTH		2.3 STF	REET ADDRES	s L	ARMON, JOE S T 2 BOX 133 J L	•••	ge Addition (C
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NALAC	DV	BURG, FL 00000	DELETE	2.3 STF 2.4 CO 3.1 TITI	REET ADDRES (Y-ST-ZIP LE	s L	ARMON, JOE S T 2 BOX 133 J L	•••	
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STREET ADDRESS	DV BOLICH, DO 1136 BIRDII	BURG, FL 00000 ONALD E ROAD	□ DELETE	2.9 STF 2.4 CM 3.1 TITI 3.2 NAI 3.3 STF	REET ADDRES TY-ST-ZIP LE ME REET ADDRES	s R D	ARMON, JOE S T 2 BOX 133 J L	5	
STREET ADDRESS CITY+ST-ZIP	DV BOLICH, DO 1136 BIRDII BROOMFIE	BURG, FL 00000 Onald	DELETE	2.9 STF 2.4 CM 3.1 TITI 3.2 NAI 3.3 STF	REET ADDRES (Y-ST-ZIP LE ME REET ADDRES (Y-ST-ZIP	s R D	ARMON, JOE S T 2 BOX 133 J L	5	ge Addition
STREET ADDRESS CITY-ST-ZIP TITLE	DV BOLICH, DO 1136 BIRDII BROOMFIEI DP	BURG, FL 00000 ONALD E ROAD LD, CO 00000		2.3 STF 2.4 CO 3.1 TITI 3.2 NAI 3.3 STR 3.4 CO 4.1 TITI	REET ADDRES TY-ST-ZIP LE ME REET ADDRES TY-ST-ZIP LE	s R D	ARMON, JOE S T 2 BOX 133 J L	5 Chang	ge Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	DV BOLICH, DO 1136 BIRDII BROOMFIEI DP WATSON, F	BURG, FL 00000 DNALD E ROAD LD, CO 00000		2.3 STF 2.4 CR 3.1 TITI 3.2 NAI 3.3 STF 3.4 CR 4.1 TITI 4.2 NA	REET ADDRES TY-ST-ZIP LE ME REET ADDRES TY-ST-ZIP LE	L R D	ARMON, JOE S T 2 BOX 133 J L	5 Chang	ge Addition
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Thereby certify that the information indicated with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report for supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if charged, or on an apachment with an address.

2/17/98