DIVISION OF CORPORATIONS

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TRANSFER SERVICES LTD. DO NOT WRITE IN THIS SPACE Date Formed or Registered To Do Business in Florida Applied For Not Applicable for a Certificate of Status 7. State or Country of Formation FEES:13 Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amo \$437.50, for each year que this office. Supplemental Fee(s): \$103.75 for each year due this office, beginning with 1992 calendar year Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee. 9. Name and Address of Current Registered Agent 10. If changed, new registered agent/office BREGMM, HOWARD E. ESQ. GREEN BELG, TRAVRIC, HOTSMAN, ET AZ \*\*\*\*E5E, 25 777 So FLATULE DRIVE, SUITE 310-EAST Zip Code Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration 11. Names of General Partner(s) City, State and Zip Code Document Number UNEVERSA TRANSFER 17536 LAKE ESTITES DE W. PARM BEACH, FL SZRVICES, INC. REINSTATEMEN

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report trustee in the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report trustee.

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\_\_\_ Telephone Number

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