

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F04000005477

FILED
May 31, 2005
Secretary of State

Entity Name: UNIVERSAL DELIVERY SOLUTIONS, INC.

Current Principal Place of Business:

751 PARK OF COMMERCE DR
112
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

751 PARK OF COMMERCE DR
112
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 20-1487409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBLIN, RYAN F
9404 FOX TROT LN
BOCA RATON, FL 33496 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

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: PLAUT, LEWIS G
Address: 6352 VIA VENETIA NORTH
City-St-Zip: DELRAY BEACH, FL 33484

Title: VST () Delete
Name: COBLIN, RYAN F
Address: 904 FOX TROT LANE
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: COBLIN, ADAM F
Address: 904 FOX TROT LANE
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PLAUT, LEWIS G
Address: 6352 VIA VENETIA NORTH
City-St-Zip: DELRAY BEACH, FL 33484

Title: CEOP (X) Change () Addition
Name: COBLIN, RYAN F
Address: 904 FOX TROT LANE
City-St-Zip: BOCA RATON, FL 33496

Title: C (X) Change () Addition
Name: COBLIN, ADAM F
Address: 904 FOX TROT LANE
City-St-Zip: BOCA RATON, FL 33496

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ADAM F. COBLIN

C

05/31/2005

Electronic Signature of Signing Officer or Director

Date