

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G28461

1. Entity Name
UNIVERSAL I REALTY, INC.



Principal Place of Business

301 ALMERIA
330
CORAL GABLES, FL 33134 US

Mailing Address

301 ALMERIA
330
CORAL GABLES, FL 33134 US

FILED
Jul 09, 2008 08:00 AM
Secretary of State



07072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2282451

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SILVEIRA, RAMON R
301 ALMERIA AVENUE
SUITE #330
CORAL GABLES, FL 33134-5822

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

U00000953763
07/09/08-80006-002 158.75
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE VPS
NAME SILVEIRA, URSULA Q
STREET ADDRESS 301 ALMERIA AVE #330
CITY-ST-ZIP CORAL GABLES, FL 331345822

TITLE PD
NAME SILVEIRA, RAMON R
STREET ADDRESS 301 ALMERIA AVE, SUITE 330
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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 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 like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 7, 2008

Date

305 442-4508

Daytime Phone #