## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 16, 1999 8:00am

**Secretary of State** 

02-16-1999 90015 014 \*\*\*150.00

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # H38105 1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

UNIVERSAL CLEARING HOUSE, INC.

| 5,117 tal 14   |  |  |  |  |   |  |                        |         |                              |
|--|--|--|--|--|---|--|------------------------|---------|------------------------------|
| Principal Place  | e of Business  | Mailing Address                                  |  |  | <u> </u>  | 1 1821271 6166 11161 16161 11611 <b>6</b> 8161 611           | : \$1271 81811 91811 ( |         |                              |
| 2850 EVANS ST 2850 EVANS ST  |  |  |  |  |   |  |                        |         |                              |
| HOLLWYOOD FL 33020 HOLLWYOOD FL 33020  |  |  |  |  |   | DO NOT WRITE IN  | I THIS SDACE           |         |                              |
| us us  |  |  |  |  |   | DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed |                        |         |                              |
|  |  |  |  |  |   | 01/15/1985   |                        |         |                              |
| 2. Principal Place of Business   |  | 2a. Mailing Address                              |  |  |   | 4. FEI Number Applied For                                    |                        |         |                              |
| 21   |  | F-1  | 26   |  |   | 59-2498738   |                        |         | plicable                     |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.                              |  |  |   |  | \$8.75 Additional      |         |                              |
| 22   |  | 27   | 27   |  |   | 5. Certificate of Status Desired Fee Required                |                        |         |                              |
| City & State   | e  | City & State                                     |  |  | · <del>-</del>  | 6. Election Campaign Financing                               | \$5.                   | 00 ма   | y Be                         |
| 23   |  | 28   | 28   |  |   | Trust Fund Contribution Added to Fees                        |                        |         |                              |
| Zip  | Country  | Zip  | Co   | untry  |   | 8. This corporation owes the current y                       |                        | _       |                              |
| 24   | 25   | 29   | 30   |  |   | Personal Property Tax.                                       | Yes                    |         | No                           |
|  | 9. Name and Address of Curre                                 | nt Registered Agent                              |  | 1  |   | 10. Name and Address of New Regis                            | tered Agent            |         |                              |
| DEC  | KER, VIVIAN L.   |  |  | 81   | Name  | •  | ,                      |         |                              |
| 2850   |  |  | 82   | Street Addre   | ess (P.O. Box Number is Not Acceptable)                             | . Ste S. xi t :  |                        |         |                              |
| HOL  | LWYOOD FL 33020  |  |  | 83   |   |  |                        |         | 77.15                        |
|  |  |  |  | 84   | City  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                        | FI 85                  | Zip Cod | в                            |
| SIGNATURE  | Signature, typed or printed name of registered ag            | ent and title if applicable. (NO<br>ND DIRECTORS | TE: Registere  |  | t signature required  | ADDITIONS/CHANGES TO OFFICE                                  | ATE<br>RS AND DIRE     | CTORS   | IN 12                        |
| TITLE  | D  | ☐ DELETE   | 117  | TITLE  |   |  |                        |         |                              |
| NAME   | FLEMING, SHIRLEY   |  | 1.1  |  | ı   |  | ☐ Cha                  | nge [   | Addition                     |
| STREET ADDRESS   | 2850 EVANS ST  | □ DECE TE  | 4  | VAME   | İ   |  | ☐ Cha                  | nge [   | Addition                     |
| CITY-ST-ZIP  | ZOOU LYANGO OT   | Deteri   | 1.21   |  | ADDRESS   |  | ☐ Cha                  | nge [   | Addition                     |
|  | HOLLYWOOD FL   |  | 1.21   |  | }   |  | ☐ Cha                  |         |                              |
| TITLE  | 1  | DELETE   | 1.2 N<br>1.3 S<br>1.4 C  | STREET   | }   |  | ☐ Cha                  |         | Addition Addition            |
| TITLE<br>NAME  | HOLLYWOOD FL PD BECKER, VIVIAN L.                            |  | 1.2 h<br>1.3 s<br>1.4 C<br>2.1 T   | STREET<br>CITY-ST  | }   |  |                        |         |                              |
|  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST              |  | 1.2 h<br>1.3 s<br>1.4 c<br>2.1 l<br>2.2 h  | STREET<br>CITY-ST<br>MTLE<br>NAME  | }   |  |                        |         |                              |
| NAME   | HOLLYWOOD FL PD BECKER, VIVIAN L.                            | ☐ DELETE   | 1.2 M<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 M<br>2.3 S   | STREET<br>CITY-ST<br>MTLE<br>NAME  | ADDRESS   |  | Cha                    | inge [  | Addition                     |
| NAME<br>STREET ADDRESS   | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST              |  | 1.2 h<br>1.3 s<br>1.4 (<br>2.1 l<br>2.2 k<br>2.3 s<br>2.4  | STREET<br>CITY-ST<br>ITTLE<br>NAME<br>STREET   | ADDRESS   |  |                        | inge [  |                              |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST              | ☐ DELETE   | 1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 P<br>2.3 S<br>2.4 4<br>3.1 T   | STREET CITY-ST TITLE VAME STREET CITY-ST   | ADDRESS   |  | Cha                    | inge [  | Addition                     |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST              | ☐ DELETE   | 1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 P<br>2.3 S<br>2.4 4<br>3.1 T<br>3.2 P  | STREET CITY-ST TILE VAME STREET CITY-ST  | ADDRESS   |  | Cha                    | inge [  | Addition                     |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST              | ☐ DELETE   | 1.21<br>1.38<br>1.40<br>2.11<br>2.24<br>2.38<br>2.4<br>3.11<br>3.21<br>3.38<br>3.4.  | CITY-ST TITLE VAME STREET CITY-ST TITLE VAME STREET CITY-ST TITLE VAME STREET  | ADDRESS T-ZIP ADDRESS   |  | ☐ Cha                  | inge [  | Addition  Addition           |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST              | ☐ DELETE   | 1.21<br>1.38<br>1.40<br>2.11<br>2.21<br>2.38<br>2.4<br>3.11<br>3.21<br>3.38<br>3.4.  | CITY-ST TITLE VAME STREET CITY-ST TITLE VAME STREET CITY-ST TITLE TITLE TITLE TITLE TITLE  | ADDRESS T-ZIP ADDRESS   |  | Cha                    | inge [  | Addition                     |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST              | ☐ DELETE   | 1.21<br>1.38<br>1.40<br>2.11<br>2.21<br>2.35<br>2.4<br>3.11<br>3.21<br>3.38<br>3.4.<br>4.11  | STREET CITY-ST TITLE STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME   | ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP                         |  | ☐ Cha                  | inge [  | Addition  Addition           |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST HOLLWYOOD FL | ☐ DELETE   | 1.21<br>1.38<br>1.40<br>2.11<br>2.21<br>2.38<br>2.4<br>3.11<br>3.21<br>3.38<br>3.4.<br>4.11<br>4.2   | STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET TITLE NAME NAME   | ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP                         |  | ☐ Cha                  | inge [  | Addition  Addition           |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST HOLLWYOOD FL | ☐ DELETE   | 1.21<br>1.38<br>1.40<br>2.11<br>2.24<br>2.38<br>2.4<br>3.11<br>3.21<br>3.38<br>3.4.<br>4.11<br>4.2<br>4.38<br>4.40                         | STREET TITLE VAME STREET CITY-S' TITLE VAME STREET CITY-S' TITLE NAME NAME STREET NAME   | ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP                         |  | ☐ Cha                  | inge [  | Addition  Addition  Addition |
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| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST HOLLWYOOD FL | ☐ DELETE   | 1.21<br>1.38<br>1.40<br>2.11<br>2.21<br>2.35<br>2.4<br>3.11<br>3.21<br>3.36<br>3.4.<br>4.11<br>4.2<br>4.38<br>4.40<br>5.11<br>5.21         | OTREET CITY-ST TITLE NAME CITY-S' TITLE NAME TITLE NAME STREET CITY-S' TITLE NAME STREET CITY-S' TITLE NAME STREET TITLE NAME NAME NAME NAME   | ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP          |  | ☐ Cha                  | inge [  | Addition  Addition  Addition |
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| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST HOLLWYOOD FL | ☐ DELETE   | 1.2h<br>1.3s<br>1.4(<br>2.11<br>2.2h<br>2.3s<br>2.4<br>3.11<br>3.3c<br>3.4.<br>4.11<br>4.2<br>4.3s<br>4.40<br>5.11<br>5.2h<br>5.3s<br>5.40 | OTREET CITY-ST TITLE NAME CITY-S' TITLE NAME TITLE NAME STREET CITY-S' TITLE NAME STREET CITY-S' TITLE NAME STREET TITLE NAME NAME NAME NAME   | ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS F-ZIP  ADDRESS |  | ☐ Cha                  | inge [  | Addition  Addition  Addition |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS  | HOLLYWOOD FL PD BECKER, VIVIAN L. 2850 EVANS ST HOLLWYOOD FL | ☐ DELETE   | 1.21<br>1.33<br>1.44<br>2.11<br>2.27<br>2.35<br>2.4<br>3.11<br>3.21<br>3.33<br>3.4.<br>4.11<br>5.21<br>5.33<br>5.44<br>6.11                | CITY-ST TITLE VAME STREET CITY-S' TITLE VAME STREET CITY-S' TITLE VAME STREET CITY-S' TITLE VAME STREET CITY-S' TITLE VAME STREET CITY-ST TITLE VAME STREET CITY-ST CITY-ST CITY-ST  | ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS F-ZIP  ADDRESS |  | ☐ Cha                  | inge [  | Addition                     |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, og on an attactoment with an address, with all other like empowered. **SIGNATURE** 

6.4 CITY-ST-ZIP