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May 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L05866

(3)

1. Corporation Name

UNIVERSAL SERVICES ENTERPRISE, INC.

Principal Place of Business

244 BISCAYNE BLVD
2ND FLOOR ROOM 1
MIAMI FL 33101
US 33132

Mailing Address

244 BISCAYNE BLVD.
P. O. BOX 015626
MIAMI FL 33101-5626
US

3. Date Incorporated or Qualified
07/28/1989

3a. Date of Last Report
03/21/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

65-0136098

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

MEDINA, FELIX F.
3101 NW 109TH AVE
SUNRISE FL 33351

10. Name and Address of New Registered Agent

81 Name Francis F. Medina
82 Street Address (P.O. Box Number is Not Acceptable)
915 N.W. 1st Avenue, H1212
83
84 City Miami FL 85 Zip Code 33136

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Francis F. Medina

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

(NOTE: Registered Agent's signature required when reinstating)

May 12, 1997

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME MEDINA, FELIX F
STREET ADDRESS 3101 NW 109TH AVE
CITY-ST-ZIP SUNRISE FL
☒ DELETE

TITLE DVST
NAME MEDINA, FRANCIS F
STREET ADDRESS 915 NW 1ST AVE, H1212
CITY-ST-ZIP MIAMI FL 33136
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
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☐ DELETE

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☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DVP
1.2 NAME EDGARDO TEMPLO
1.3 STREET ADDRESS 915 N.W. 1st AVENUE, H1212
1.4 CITY-ST-ZIP Miami, FL. 33136
☐ Change ☒ Addition

2.1 TITLE DVP
2.2 NAME FIDEL S. MEDINA
2.3 STREET ADDRESS 1400 Doe Hollow Trace
2.4 CITY-ST-ZIP Lilburn, Ga. 30247
3.1 TITLE DPST
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP 33136
☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. I do 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, or on an attachment with an address.

SIGNATURE Francis F. Medina

CR2E034 (9/96)