

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M00106

FILED  
Jan 15, 2004  
Secretary of State

Entity Name: UNIVERSAL WARRANTY CORPORATION

## Current Principal Place of Business:

2090 PALM BEACH LAKES BLVD  
SUITE 200  
W. PALM BCH., FL 33409

## New Principal Place of Business:

## Current Mailing Address:

2090 PALM BEACH LAKES BLVD  
SUITE 200  
W. PALM BCH., FL 33409

## New Mailing Address:

FEI Number: 59-2413666

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TANEN, JEFFREY S ESQ.  
TWO SOUTH BISCAYNE BLVD.  
SUITE 3250  
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DV ( ) Delete  
Name: COLLINS, HARRY  
Address: 2235 OKEECHOBEE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: DST ( ) Delete  
Name: SOTHEN, JULIE  
Address: 2235 OKEECHOBEE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: PD ( ) Delete  
Name: DEAN, PATRICIA B  
Address: 2235 OKEECHOBEE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: DS ( ) Delete  
Name: BARKMAN, MICHELE  
Address: 2090 PALM BEACH LAKES BLVD. 200  
City-St-Zip: WEST PALM BEACH, FL 33409

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BARKMAN, MICHELE  
Address: 2090 PALM BEACH LAKES BLVD. 200  
City-St-Zip: WEST PALM BEACH, FL 33409

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: MICHELE BARKMAN

D

01/15/2004

Electronic Signature of Signing Officer or Director

Date