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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M25233

(1)

UNIVERSAL CAMBIOS, INC.

• (

Principal Place of Business	Mailing Address			
143 NE 3 AVE.	143 NE 3 AVE.			
MIAMI FL 33132	MIAMI FL 33132			

## FILED May 11 1998 8:00am Secretary of State



	-				DO NOT WRITE IN THIS S	PACE	
					3. Date Incorporated or Qualified		
					12/30/1985		
2. Principal Place of Business 2a. Mailing Address					4, FEI Number	Applied For	
21	26				59-2615830	Not Applicable	
Sulte, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Add		\$8.75 Additional	
27					8, Oblinicate of Claros Dosined	Fee Required	
City & State City & State				6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zιρ	Cour	try	8. This corporation owes or has paid the curr		
24	25	29	30			Yes No	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered A	gent	
ROI	F. LILIANS		Į,	Name			
1900 \$. MIAMI AVE.				82 Street Address (P.O. Box Number is Not Acceptable)			
	MI FL 33129			3 lifet Address (F.O. Dox Mulliper is Not Acceptable)			
*****			Ţ.	33			
			-			Ter Code	
			l'	City	FL	85 Zip Code	
11. Pursuant to	the provisions of Sections 607.050	2 and 607.1508, Florida Sta	tutes, the ab	ove-named co	rporation submits this statement for the purpose of	changing its registered	
office or re	gistered agent, or both, in the State	of Florida, Such change wa	s authorized	by the corpor	ation's board of directors. I hereby accept the appo	intment as registered	
•	mantinar with, and accept the oblig	lations of, Socion 607.0000,	Fiorius State	165.			
SIGNATURE	Signature, typed or printed name of registerior ag-	et ang tiru it applicable (f	NOTE Registered	Agent signature req	uired when reinstating) DATE		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	DPST	☐ DELETE	1.1 1111	E		Change Addition	
NAME	ROIF, LILIANS		1.2 NA	AE I			
STREET ADDRESS	1900 S. MIAMI AVE.		1.3 STE	EET ADDRESS			
CITY-ST-ZIP	MIAMI FL			r-ST-ZIP			
TITLE	Print View	DELETE	2.1 TIT			Change Addition	
NAME			2.2 NA			_	
				EET ADDRESS			
STREET ADDRESS					•		
CITY-ST-ZIP		DELETE	2. 4 CI	Y-ST-ZIP		Change Addition	
				1	·		
NAME			3.2 NA				
STREET ADDRESS				EET ADDRESS		i	
CITY-ST-ZIP		Dr. eve		Y-ST-ZIP		Change Addition	
TITLE		☐ DELETE	4.1 T(T)	I .		L Cliange L ADORION	
NAME			4. 2 NA				
STREET ADDRESS			4.3 S1F	EET ADDRESS			
CITY-ST-ZIP				r-ST-ZIP		10.00	
TITLE		☐ DÉLE <b>t</b> e	5.1 TiT	E		Change Addition	
NAME			5.2 NAI	Æ			
STREET ADDRESS			5.3 STF	EET ADDRESS			
CITY-ST-ZIP			5.4 CIT	(-ST-7/P			
TITLE		DELETE	6.1 Trī	.E		☐ Change ☐ Addition	
NAME			6.2 NA	AE			
STREET ADDRESS			6.3 STF	EET ADDRESS			
CITY-ST-ZIP	1			Y-ST-ZIP		1	
out-distu			3 1 0 11				

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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in Section 119.07(3)(ii), Florida Sta

4/30/98