

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003519

FILED
Jul 30, 2006
Secretary of State

Entity Name: THE INIVERSAL MARCUS INSTITRUTH, INC.

Current Principal Place of Business:

2864 NW 9 COURT
FT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

P O BOX 15643
MIAMI, FL 331015643

New Mailing Address:

FEI Number: 65-1127909 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RICKETTS, DONALD
2864 NW 9 COURT
FT LAUDERDALE, FL 33311 US

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RICKETTS, DONALD
Address: 2864 NW 9 COURT
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D () Delete
Name: WILLIAMS, LESLIE
Address: 17204 NW 49 PLACE
City-St-Zip: MIAMI, FL 33055

Title: D () Delete
Name: BEESE, ALTINE K
Address: 6308 NW 19 AVE
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: GUMBS, MARCIA
Address: 11100 SW 197 STREET, BLDG 6-310
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: CLARKE, ASHBOURNE
Address: 3701 NW 19 STREET
City-St-Zip: COCONUT CREEK, FL 33066

Title: D () Delete
Name: MALIK, ROCKA
Address: 11371 SW 176 STREET
City-St-Zip: MIAMI, FL 33157

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD RICKETTS

D

07/30/2006

Electronic Signature of Signing Officer or Director

Date