2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005175

Entity Name: UNIVERSAL CHARITIES FOUNDATION, INC.

FILED Jul 02, 2005 Secretary of State

8240 N.W. 8TH STREET MIAMI, FL 33126 US

Current Mailing Address: New Mailing Address:

8240 N.W. 8TH STREET MIAMI, FL 33126 US

FEI Number: 27-0061242 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:

FIGUEROA, PLINIO 8240 N.W. 8TH STREET MIAMI, FL 33126 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: FIGUEROA, PLINIO Name: FIGUEROA, PLINIO
Address: 8240 N.W. 8TH STREET Address: 1300 SW 152 PL

City-St-Zip: MIAMI, FL 33126 US City-St-Zip: MIAMI, FL 33194 US

Title: () Delete Title: (X) Change () Addition VALENCIA, MARCO Name: Name: VALENCIA, MARCO Address: 8240 N.W. 8TH STREET Address: 1300 SW 152 PL City-St-Zip: MIAMI, FL 33126 US City-St-Zip: MIAMI, FL 33194 US

 $\label{eq:title:title:VP} \mbox{Title:} \mbox{ VP } \mbox{() Delete} \mbox{ Title: VP } \mbox{(X) Change () Addition}$

 Name:
 FIGUEROA, SAUL J
 Name:
 FIGUEROA, SAUL J

 Address:
 8240 NW 8TH STREET
 Address:
 1300 SW 152 PL

 City-St-Zip:
 MIAMI, FL 33126 US
 City-St-Zip:
 MIAMI, FL 33194 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCO VALENCIA DIRE 07/02/2005