

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009195

FILED
Mar 23, 2005
Secretary of State

Entity Name: UNIVERSE OF MARTIAL ARTS COMPETITION FUND, INC.

Current Principal Place of Business:

16530 NW 86TH COURT
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:
16530 NW 86TH COURT
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 42-1654938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUELLES, BEATRIS M
16530 NW 86TH COURT
MIAMI LAKES, FL 33016 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ARGUELLES, ALFREDO II
Address: 16530 NW 86TH COURT
City-St-Zip: MIAMI LAKES, FL 33016

Title: D () Delete
Name: DELGADO, ELIZABETH
Address: 12730 NW 102ND PLACE
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: D () Delete
Name: GOMEZ, MAYELIN
Address: 898 W 79TH STREET
City-St-Zip: HIALEAH, FL 33014

Title: D () Delete
Name: ACOSTA, LENNY
Address: 1466 SPRINGSIDE DRIVE
City-St-Zip: WESTON, FL 33326

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
Name:
Address:
City-St-Zip:

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 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: ALFREDO ARGUELLES, II

DIR

03/23/2005

Electronic Signature of Signing Officer or Director

Date