

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2004 8:00 am
Secretary of State

07-07-2004 90002 026 ***550.00

DOCUMENT # P01000078123

1. Entity Name
UNIVERSAL MORTGAGE, INC.



Principal Place of Business

1749 NW 39TH ST.
OAKLAND PARK, FL 33309

Mailing Address

1749 NW 39TH ST.
OAKLAND PARK, FL 33309

34060125

2. Principal Place of Business

120 EAST OAKLAND PK BLW

3. Mailing Address

Suite, Apt. #, etc.

#105-86

Suite, Apt. #, etc.

City & State

FORT LAUDERDALE, FL

City & State

Zip

33334-1106

Country

BROWARD

Zip

Country

07022004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-1124925

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAHADOORSHGH, RAMESH
1749 NW 29 ST
FORT LAUDERDALE, FL 33309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Ramesh Bahadoorsingh **RAMESH BAHADOORSINGH**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

07/02/2004

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
BAHADOORSINGH, RAMESH
1749 NW 39TH ST.
OAKLAND PARK, FL 33309

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
RAYNES, ELAINE S
3101 SW 52ND AVE
DAVIE, FL 333141928

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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12. 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ramesh Bahadoorsingh **RAMESH BAHADOORSINGH**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/02/2004

Date

954-733-2431

Daytime Phone #