

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000002810

FILED
Jan 03, 2006
Secretary of State

Entity Name: UNIVERSAL ULTRA-SERVICES, INC.

Current Principal Place of Business:

4476 PHILADELPHIA CIRCLE
4476
KISSIMMEE, FL 34746

Current Mailing Address:

4476 PHILADELPHIA CIRCLE
4476
KISSIMMEE, FL 34746

FEI Number: 02-0533942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

New Principal Place of Business:

4476 PHILADELPHIA CIRCLE
4476
KISSIMMEE, FL 34746 US

New Mailing Address:

4476 PHILADELPHIA CIRCLE
4476
KISSIMMEE, FL 34746 US

Name and Address of Current Registered Agent:

YUE, BENJAMIN
4476 PHILADELPHIA CIRCLE
4476
KISSIMMEE, FL 34746 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: YUE, XIAO-SHENG
Address: 4476 PHILADELPHIA CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: YUE, XIAO-SHENG
Address: 4476 PHILADELPHIA CIRCLE
City-St-Zip: KISSIMMEE, FL 34746 US

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

SIGNATURE: XIAOSHENG YUE

CEO

01/03/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date