

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013948

FILED
Feb 06, 2004
Secretary of State

Entity Name: UNIVERSAL CONCRETE ENGRAVING, INC.

Current Principal Place of Business:

1565 N BANANA RIVER DR
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

1565 N BANANA RIVER DR
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 33-0995142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWAIM, TERRY L
1565 N BANANA RIVER DR
MERRITT ISLAND, FL 32952

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: PD () Delete
Name: SWAIM, TERRY L
Address: 1565 N BANANA RIVER DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: STD () Delete
Name: SWAIM, ROBIN G
Address: 1565 N BANANA RIVER DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VO () Delete
Name: LOWRY, BRAD E
Address: 1920-76 WOODHAVEN CIR.
City-St-Zip: ROCKLEDGE, FL 32955

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: SWAIM, TERRY L
Address: 1565 N BANANA RIVER DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD (X) Change () Addition
Name: SWAIM, ROBIN G
Address: 1565 N BANANA RIVER DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: PD (X) Change () Addition
Name: MOREE, JAMES I
Address: 716 SIXTH ST.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: SD () Change (X) Addition
Name: MOREE, ALLISON I
Address: 716 SIXTH ST.
City-St-Zip: MERRITT ISLAND, FL 32953

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

SIGNATURE: JAMES I MOREE

PD

02/06/2004

Electronic Signature of Signing Officer or Director

_____ Date