

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2008 8:00 am
Secretary of State

08-07-2008 90063 039 ***150.00

DOCUMENT # P02000047760

1. Entity Name
UNIVERSAL INVESTMENTS & HOMES, INC.



Principal Place of Business
**12701 S. JOHN YOUNG PKWY
STE 109
ORLANDO, FL 32837**

Mailing Address
**12701 S. JOHN YOUNG PKWY
STE 109
ORLANDO, FL 32837**

40112812



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07172008 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
02-0593779

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BYRNES, PERLA
12701 S. JOHN YOUNG PKWY
STE 109
ORLANDO, FL 32837**

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

Perla Byrnes

8-1-08

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BYRNES, PERLA 176 CORAL REEF CIRCLE KISSIMMEE, FL 34743	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MALDONADO, JIMMY 176 CORAL REEF CIR KISSIMMEE, FL 34743	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Perla Byrnes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-01-08

Date

Daytime Phone #

40112812

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Business Entity Name UNIVERSAL INVESTMENTS & HOMES, INC.

- ☒ After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if filing after May 1st and notice was not received.

FEI Number 02 - 0593779

FEI Number Status ☒ Listed Above ☐ Applied For ☐ Not ApplicableCertificate of Status ☐ \$8.75 (Optional)Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Principal Place of Business

Address 12701 S. JOHN YOUNG PKWY (PO Box not acceptable)

Suite, Apt. #, etc. STE 109

City, State ORLANDO, FL

Zip Code & Country 32837

Mailing Address

If your mailing address is the same as the principal address above, please check the box below. Otherwise, enter your mailing address.

☐ Mailing address same as principal address

Address 12701 S. JOHN YOUNG PKWY

Suite, Apt. #, etc. STE 109

City, State ORLANDO, FL

Zip Code & Country 32837

Name And Address of Registered Agent

Name (Last, First, Middle, Title) BYRNES, PERLA, ,

- OR -

Business to serve as RA

Street Address In Florida 12701 S. JOHN YOUNG PKWY (PO Box not acceptable)

ATTACHMENT

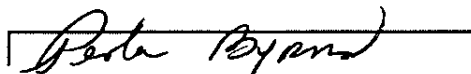
40112812

#P02000047760

Suite, Apt. #, etc. STE 109
City, State ORLANDO, FL
Zip Code & Country 32837 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature



This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

Officer/Director Name And Address**Name And Address #1**

Title PD
Name (Last, First, Middle, Title) BYRNES, PERLA, ,
- OR -
Entity Name to serve as Officer/Director

Street Address 176 CORAL REEF CIRCLE
City, State KISSIMMEE, FL
Zip Code & Country 34743

Name And Address #2

Title VP
Name (Last, First, Middle, Title) MALDONADO, JIMMY, ,
- OR -
Entity Name to serve as Officer/Director

Street Address 176 CORAL REEF CIR
City, State KISSIMMEE, FL
Zip Code & Country 34743

Name And Address #3

Title
Name (Last, First, Middle, Title) , , ,
- OR -
Entity Name to serve as Officer/Director

Street Address
City, State ,

ATTACHMENT

40112812

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