2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121226

Address:

City-St-Zip:

6647 W 22ND LANE

HIALEAH, FL 33016

- 444 N

FILED Apr 20, 2004 Secretary of State

Entity Name: UNIVERSAL PHONE PLUS, INC. **Current Principal Place of Business: New Principal Place of Business:** 1938 NW 17TH AVE MIAMI, FL 33125 **Current Mailing Address: New Mailing Address:** 1938 NW 17TH AVE MIAMI, FL 33125 FEI Number: 14-1859854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DE LOS SANTOS, FRANKLYN 15651 SW 112ND WAY MIAMI, FL 33196 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DE LOS SANTOS, FRANKLIN Name: Name: 15651 SW 112ND WAY Address: Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: Title: DΡ Title: () Delete () Change () Addition SANCHEZ, JULIAN M Name: Name: 8323 NW 195TH TERRACE Address: Address: MIAMI, FL 33015 City-St-Zip: City-St-Zip: () Delete Title: Title: DS () Change () Addition HERNANDEZ, JULIAN E Name: Name: 8810 NW 189TH TERRACE Address: Address: City-St-Zip: MIAMI, FL 33018 City-St-Zip: Title: DT () Delete Title: () Change () Addition PORTILLO, JOSE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JULIAN M. SANCHEZ DP 04/20/2004