

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121226

Entity Name: UNIVERSAL PHONE PLUS, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

1938 NW 17TH AVE
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

1938 NW 17TH AVE
MIAMI, FL 33125

New Mailing Address:

FEI Number: 14-1859854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DE LOS SANTOS, FRANKLYN
15651 SW 112ND WAY
MIAMI, FL 33196 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 (X).

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: DE LOS SANTOS, FRANKLIN
Address: 15651 SW 112ND WAY
City-St-Zip: MIAMI, FL 33196

Title: DP () Delete
Name: SANCHEZ, JULIAN M
Address: 8323 NW 195TH TERRACE
City-St-Zip: MIAMI, FL 33015

Title: DS () Delete
Name: HERNANDEZ, JULIAN E
Address: 8810 NW 189TH TERRACE
City-St-Zip: MIAMI, FL 33018

Title: DT () Delete
Name: PORTILLO, JOSE
Address: 6647 W 22ND LANE
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JULIAN SANCHEZ

DP

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date