

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2004 8:00 am
Secretary of State

08-23-2004 90021 021 ***150.00

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08152004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000071413 1. Entity Name UNIVERSAL FLEET LEASING, INC.					
Principal Place of Business 4105 N. FLORIDA AVE. TAMPA, FL 33603			Mailing Address 4105 N. FLORIDA AVE. TAMPA, FL 33603		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-0062817	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent VALLEE, SEAN C 2311 W. BURKE STREET TAMPA, FL 33604				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VALLEE, SEAN C 2311 W. BURKE STREET TAMPA, FL 33604		<input type="checkbox"/> Delete		
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 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 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: <i>Sean C. Vallee</i>			Date 8/26/04		Daytime Phone # (813) 237-6034
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

Attachment

241680930

JOHN T. WEAVER, CPA, P.A.

Certified Public Accountant

3601 SWANN AVE, STE 207

TAMPA, FLORIDA 33609

Telephone: 813-870-0084 *** Cell Phone 813-486-2565 *** Fax 813-350-0288

August 12, 2004

Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32314

RE: 2004 For Profit Corporation Annual Report

Universal Fleet Leasing, Inc.

Document Number: P03000071413

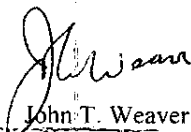
Dear Sir or Madam:

Please accept our payment of \$ 150.00 to pay the 2004 Uniform Business Report. The client states that he never received the annual report forms or any notifications from the Secretary of State.

The reason this corporation did not file their annual report timely was that they did not receive the UBR. I went on line for them and printed it out for them. Please restore the corporation to active status.

Thank you for your assistance in this matter. I appreciate the good job you do. If you need additional information or I can answer any questions for you, please call me at 813-870-0084.

Sincerely,



John T. Weaver

Certified Public Accountant