05-03-2004 91016 047 **150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
04 JUN 22 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000079093

1. Entity Name
~~CAST STEEL PRODUCTS, INC.~~
U.M.C.S. UNIVERSAL MANAGEMENT CONSULTING SERVICES, INC.

Principal Place of Business	Mailing Address
286-107 AVENUE ST. PETERSBURG, FL 33706 US	286-107 AVENUE ST. PETERSBURG, FL 33706 US

2. Principal Place of Business	3. Mailing Address
#1 BEACH DRIVE	#1 BEACH DRIVE
Suite, Apt. #, etc.: #2002	Suite, Apt. #, etc.: #2002
City & State: ST. PETERSBURG, FL.	City & State: ST. PETERSBURG, FL.
Zip: 33701 Country: USA	Zip: 33701 Country: USA

04202004 Chg-P CR2E034 (10/03)

4. FEI Number: 14-1895626 ☐ Applied For ☐ Not Applicable

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
~~JOHN NEWKAUM~~ 101 EAST KENNEDY BOULEVARD BANK OF AMERICAN PLAZA, SUITE 3140 TAMPA, FL 33602-5151	Name: ALFRED A. COLBY / JOHN NEWKAUM Street Address (P.O. Box Number is Not Acceptable): SAME 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP POLAND, DOUG ~~556 5 AVE NE #843~~ ~~SAINT PETERSBURG, FL 33701~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition #1 BEACH DR. #2002 ST. PETERSBURG, FL. 33701
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D POLAND, LEONA ~~556 5 AVE NE #843~~ ~~SAINT PETERSBURG, FL 33701~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition #1 BEACH DR. #2002 ST. PETERSBURG, FL 33701
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 6/22

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: _____ LEONA POLAND 4/20/04 (727)342-7303
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #