2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0400073145 1. Entity Name UNIVERSAL LOVE SYSTEMS, INC.					FILED 05 AUG -1 AM II: 24					
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Principal Place of Business 6940 SW 36TH STREET MIRAMAR, FL 33023		Mailing Address 6940 SW 36TH STREET MIRAMAR, FL 33023			SECKETANT OF STATE TALLAHASSEE, FLORIDA					
2. Principal Place of Business		3. Mailing Address 3146 NW 684 Sweet		•						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<u> </u>	07292005	Chg-P	CR2E0	34 (10/03)		
City & State		City & State Fr. Landerdale, Firios		A	4. FEI Numb	-32246	20		plied For t Applicable	
Zıp	Country	Zip C 33309-1206	A 2 N			e of Status Desired	П	\$8.75 Add Fee Required		
Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent Name						
BLOOMFIELD, SIMON 6940 SW 36TH STREET MIRAMAR, FL 33023				Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Code	9	
	ed entity submits this statement for of registered agent.	stered office or	registere	ed agent, or be	oth, in the State of Fl	orida. Lam	familiar with,	and accept		
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Due by September 7, 2005 Trust Fund Contribution. Added to Fees										
10. OFFICERS AND DIRECTORS 11.						CHANGES TO OF			_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				B100	mfield o sw :	ED/Chairp Simon	er_	☐ Change	Addition	
TITLE			CITY-ST-ZIP TITLE	Frec		irector_	5023	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	NAM PESS STRE			6940	nfield sw 31	Wendy In Street				
NAME			TITLE NAME STREET ADDRESS	Boom	o Advis	·R/Ex-offi	cio H.	☐ Change	Addition	
CITY-ST-ZIP			CITY-ST-ZIP	354 	Londer	STREET	OA 33	5309-1	206	
TITLE			TITLE NAME					☐ Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS		4	. <mark>00058</mark>)3/050105	199			
CITY+ST-ZIP			CITY-ST-ZIP	-	0070	12/U2==U1U5 •	n012	**150 □ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS			\(\frac{1}{2}\)	Jal.	•	_	
CITY-ST-ZIP			CITY-ST-ZIP			\mathcal{U}	MI			
TITLE	• • • • • • • • • • • • • • • • • • • •	_ 55.5.5	TITLE			···		☐ Change	Addition	
STREET ADDRESS			NAME STREET ADDRESS							
CITY-ST-ZIP	v that the information europlied with		CITY-ST-ZIP	ed in Sco	tion 119 07/2	Yil Florida Statutos	I further ger	tify that the in	dormation	
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 a statute with all other like empowered.										
SIGNATURE: Mar 1940) Simon Bloomfield 07/29/2005 (954)655-0434										

Date: July 27, 2005

Department of Standard Chifton H. Rockiauez, CPA, PA

De: Universal Love Systems, Luc: P04000073145

We are remitting the annual report for our client, Universal Love Systems, low. We spoke with the president /CEO, Mr. Simon Bloomfield, who advised us that he never received the initial post corp, supposedly mailed on January;

Times, we are hereby requesting a waiver to the late fee to \$400. We have tenchosal a check in the amount to \$150.

Incidentally, we are changing the mailing address so that we will receive all nother in the future.

cc: Mr. Simon Bloomfield

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