

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000139512

1. Entity Name
ULTIMATE ONE SERVICES, INC.



**FILED
Apr 18, 2005 8:00 am
Secretary of State**

04-18-2005 90339 048 ***150.00

Principal Place of Business
1092 JUPITER PARK LANE
SUITE 130
JUPITER, FL 33458

Mailing Address
1092 JUPITER PARK LANE
SUITE 130
JUPITER, FL 33458

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02022005 Chg-P CR2E034 (10/03)

4. FEI Number
74-3132483

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

SELZ, STEVEN M ESQ.
214 BRAZILIAN AVENUE
SUITE 220
PALM BEACH, FL 33480

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

(Signature, typed or printed name of registered agent and the State code.) (Not for Agent Change or Extra Services when available) (Date)

**FILE NOW!! FEE IS \$150.00
After May 1, 2005 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution: \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME BITTENBINDER, ROBERT
STREET ADDRESS 1801 TUDOR ROAD
CITY-ST-ZIP NORTH PALM BEACH, FL 33408

Delete

TITLE VP
NAME NOBLE, RYAN
STREET ADDRESS 1092 JUPITER PARK LANE, SUITE 130
CITY-ST-ZIP JUPITER, FL 33458

Delete

TITLE TRES
NAME BITTENBINDER, ROBERT
STREET ADDRESS 1801 TUDOR ROAD
CITY-ST-ZIP NORTH PALM BEACH, FL 33408

Delete

TITLE SEC
NAME NOBLE, RYAN
STREET ADDRESS 1092 JUPITER PARK LANE, SUITE 130
CITY-ST-ZIP JUPITER, FL 33458

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.01(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 "D" or Block "E" if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

3/30/05

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