

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-18-2005 90339 048 \*\*\*150.00

**DOCUMENT # P04000139512**

1. Entity Name  
**ULTIMATE ONE SERVICES, INC.**



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 computerized, of registered agent and filer (also date).

(NOTE: Registered Agent signature is not required when submitting)

Date

**FILE NOW!! FEE IS \$150.00**  
**After May 1, 2005 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

TITLE **P** ☐ Delete  
NAME **BITTENBINDER, ROBERT**  
STREET ADDRESS **1801 TUDOR ROAD**  
CITY-STATE-ZIP **NORTH PALM BEACH, FL 33408**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE **VP** ☐ Delete  
NAME **NOBLE, RYAN**  
STREET ADDRESS **1092 JUPITER PARK LANE, SUITE 130**  
CITY-STATE-ZIP **JUPITER, FL 33458**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE **TRES** ☐ Delete  
NAME **BITTENBINDER, ROBERT**  
STREET ADDRESS **1801 TUDOR ROAD**  
CITY-STATE-ZIP **NORTH PALM BEACH, FL 33408**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE **SEC** ☐ Delete  
NAME **NOBLE, RYAN**  
STREET ADDRESS **1092 JUPITER PARK LANE, SUITE 130**  
CITY-STATE-ZIP **JUPITER, FL 33458**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 9.07(3)(f), 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

Date

Day Month Year

3/26/05