

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000167209

FILED  
May 10, 2005  
Secretary of State

**Entity Name:** UNIVERSAL MANPOWER CORPORATION AND ASSOCIATES

**Current Principal Place of Business:**

UNIVERSAL MANPOWER CORPORATION AND ASSOCIA  
1600 SOUTH DIXIE HWY #110  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

UNIVERSAL MANPOWER CORPORATION AND ASSOCIA  
1600 S. DIXIE HWY ROYAL PALM TOWERS #110  
BOCA RATON, FL 33432 US

**New Mailing Address:**

**FEI Number:** 20-2085396

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRUZ, EMMANUEL VP  
16 ROYAL PALMWAY  
#105  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SIMBAJON, BELLA PRES  
Address: 6444 LA COSTA DRIVE  
City-St-Zip: BOCA RATON, FL 33433 US

Title: VP ( ) Delete  
Name: CRUZ, EMMANUEL VP  
Address: 16 ROYAL PALMWAY #105  
City-St-Zip: BOCA RATON, FL 33432 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMMANUEL R CRUZ

TREA

05/10/2005

Electronic Signature of Signing Officer or Director

Date