

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90313 010 ***150.00

DOCUMENT # P05000047447

1. Entity Name
U-TRAC, INC.



Principal Place of Business

100 S BUMBY AVE
ORLANDO, FL 32803

Mailing Address

100 S BUMBY AVE
ORLANDO, FL 32803

2. Principal Place of Business

9438 Water Fern Cir
Suite, Apt. #, etc.

3. Mailing Address

9438 Water Fern Cir
Suite, Apt. #, etc.

City & State

Clermont FL

City & State

Clermont, FL

Zip

34711

Country

USA

Zip

34711

Country

USA

4. FEI Number

74-3142220

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MINORS, SOPHIA
100 S BUMBY AVE
ORLANDO, FL 32803

7. Name and Address of New Registered Agent

Name Sophia Minors

Street Address (P.O. Box Number is Not Acceptable)

9438 Water Fern Circle

City Clermont

FL

Zip Code

34711

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

Sophia Minors

04-09-06

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MINORS, SOPHIA
STREET ADDRESS 100 S BUMBY AVE 9438 Water Fern Cir
CITY-ST-ZIP ORLANDO, FL 32803 Clermont, FL 34711

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Sophia Minors

04-09-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #