

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000110536

FILED
Apr 14, 2007
Secretary of State

Entity Name: UNIVERSAL MECHANICAL SERVICES, INC.

Current Principal Place of Business:

1490 NE PINE ISLAND ROAD
BUILDING 5
CAPE CORAL, FL 33909

New Principal Place of Business:

1490 NE PINE ISLAND ROAD
BLDG 5E
CAPE CORAL, FL 33909

Current Mailing Address:

1490 NE PINE ISLAND ROAD
BUILDING 5
CAPE CORAL, FL 33909

New Mailing Address:

1490 NE PINE ISLAND ROAD
BLDG 5E
CAPE CORAL, FL 33909

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLLINS, ANTHONY V
Address: 1490 NE PINE ISLAND ROAD #5
City-St-Zip: CAPE CORAL, FL 33909

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COLLINS, ANTHONY V
Address: 1490 NE PINE ISLAND ROAD BLDG 5E
City-St-Zip: CAPE CORAL, FL 33909

Title: VP () Change (X) Addition
Name: ALPERT, MERRICK
Address: 1490 NE PINE ISLAND ROAD BLDG 5E
City-St-Zip: CAPE CORAL, FL 33909

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: COLLINS, ANTHONY V.

P

04/14/2007

Electronic Signature of Signing Officer or Director

Date