2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P17960

1. Entity Name

UNIVERSAL COMPUTER SERVICES, INC. OF DELAWARE

Principal Place of	Business	Mailing Address						
6700 HOLLISTER HOUSTON TX 77040		6700 HOLLISTER HOUSTON TX 77040-5331						
2. Principal Place of Business		3. Mailing Address	s					
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
City & State		City & State						
Zip	Country	Zip	Country					

FILED Jun 05, 2000 8:00 am Secretary of State 06-05-2000 90003 044 ***150.00



2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc. City & State			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
		City & State		4.	4. FEI Number 76-0233666				Applied For Not Applicable				
Zip	Zip Country		Zip Cour		5. Certificate of Status Desi		Desired			3.75 Additional e Required			
	6. Name	and Address of Current Re	gistered Agent	·		7.	Name ar	d Address	of New Regi	stered A	gent].
	 				Name								
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				Street Address (P.O. Box Number is Not Acceptable)								- - -	
					City					FL	Zip Coc	le	
8. The above		y submits this statement for the				registered ag		oth, in the Si	ate of Florida	DATE			
Tax filing r	oration is elig	ible to satisfy its Intangible and elects to do so.	FILE NOW After MAY 1, 2 Make Check Paya	000 Fee	will be \$5	50.00 of State	7	rust Fund Co			Adde	00 May Be d to Fees	
11.		OFFICERS AND DI	RECTORS	12.		A[DDITION	S/CHANGES	TO OFFICE	RS AND	DIRECTOR	S IN 11	┦.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROCKM 6700 HOL HOUSTOI		☐ Delete								☐ Change	Addition	OE034 (0/06
TITLE NAME STREET ADDRESS CITY-ST-ZIP	٧	Robert M. Luster	☐ Delete		i						☐ Change	Addition] 2
IIILE NAME STREET ADDRESS CITY-ST-ZIP	S BUNNEY, 6700 HOI HOUSTOI		□ Dēlētē		1						-[_]-Change-	- 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BIGGS, T 6700 HOI HOUSTOI	LLISTER	☐ Delete			<u> </u>					☐ Change	Addition	
TITLE NAME STREET ADDRESS CJTY-SJ-ZJP	COOPER, 6700 HOI HOUSTOI	, CARLAN LLISTER	☐ Delete								☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JONES, T 6700 HOL HOUSTOI	TERRY LLISTER	☐ Delete			T BURNET 6700 H HOUSTO	OLLIS	BERT D	•		☐ Change	Addition	

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Assistant Secretary Assistant Secretary

SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

(7<u>13)</u> 7<u>1</u>8-1800

SIGNATURE: