

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P27071

FILED
Jan 08, 2004
Secretary of State

Entity Name: UNIVERSAL SOLUTIONS OF NORTH CAROLINA, INC.

Current Principal Place of Business:

465 SHEPHERD ST
WINSTON-SALEM, NC 27106 US

New Principal Place of Business:

465 SHEPHERD ST
WINSTON-SALEM, NC 27103 US

Current Mailing Address:

465 SHEPHERD ST
WINSTON-SALEM, NC 27106 US

New Mailing Address:

465 SHEPHERD ST
WINSTON-SALEM, NC 27103 US

FEI Number: 56-1670459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: CEO () Delete
Name: PIEDMONT, JEFF F.,
Address: 114 WATEREDGE CT
City-St-Zip: SAFETY HARBOR, FL 34695

Title: STD (X) Delete
Name: NEESE, EMILY G
Address: 2680 REYNOLDS DR.
City-St-Zip: WINSTON-SALEM, NC 27104

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: PIEDMONT, JEFF F.,
Address: 114 WATEREDGE CT
City-St-Zip: SAFETY HARBOR, FL 34695

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

Title: CEO () Change (X) Addition
Name: WESTERMANN, PETER A
Address: 465 SHEPHERD STREET
City-St-Zip: WINSTON-SALEM, NC 27103

Title: CFO () Change (X) Addition
Name: COLLINS, LOUIS E
Address: 465 SHEPHERD STREET
City-St-Zip: WINSTON-SALEM, NC 27103

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: LOUIS E. COLLINS

CFO

01/08/2004

Electronic Signature of Signing Officer or Director

_____ Date