

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PA3000077535
 1. Entity Name
UNIVERSAL PHONE CORPORATION

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

01 JUN 29 AM 11:50

Principal Place of Business
MIAMI, FLORIDA
 Mailing Address
1111 PARK CENTRE BLVD.
#102
MIAMI, FL 33169

2. Principal Place of Business
1111 PARK CENTRE BLVD.
 Suite, Apt. #, etc.
#102

City & State
MIAMI, FLORIDA

Zip
33169
 Country
USA

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 00-01
DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0473849
 Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required **SP**

6. Name and Address of Current Registered Agent

ANA I. UPEGUI
FABIO UPEGUI
8033 LAKE DR #104
MIAMI, FL 33166

7. Name and Address of New Registered Agent

Name ANA I. UPEGUI
 Street Address (P.O. Box Number is Not Acceptable)
8033 LAKE DR #104
 City MIAMI FL Zip Code 33166

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.

SIGNATURE (A) Ana I. Upegui DATE 05/31/01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change ☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ 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.

SIGNATURE: (A) Ana I. Upegui DATE 05/31/01 (305) 620 1932
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)