

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000077535

1. Entity Name
UNIVERSAL PHONE CORPORATION



FILED
04 SEP 13 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Mailing Address
1111 PARK CENTRE BLVD., #102
MIAMI, FL 33169

1100 NW 163 DR. MIAMI, FL 33169



09102004 No Chg-P CR2E034 (10/03)

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

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	UPEGUI, ANA I
STREET ADDRESS	8033 LAKE DR., #104
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	M
NAME	LIPEGUI, FABIO
STREET ADDRESS	8033 LAKE DR., #104
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

700041257157
09/22/04--01035--007 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 1/28 / FABIO UPEGUI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/19/04 305-6201932
Date Daytime Phone #

Handwritten initials