## HILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 21 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P95000064520 (6) DOCUMENT #

UNIVERSAL PROBLEM SOLVERS, INC. Principal Place of Business Mailing Address 2050 GLASS ROAD NE 2050 GLASS ROAD NE STE #207 STE #207 CEDAR RAPIDS 10 52402 DO NOT WRITE IN THIS SPACE CEDAR RAPIDS IA 52402 3. Date Incorporated or Qualified 08/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For VillageDr 59-3328145 Not Applicable pleo Magnolia Dr. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VALENTI, JEANETTE Y 1660 MAGNOLIA DRIVE 82 **CLEARWATER FL 34616** 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing Its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE **SIGNATURE** Signature: typeco or princed himse of respectived agreet and take it apply while (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 1/11/6 ROMANIUK, STEVE ROHANTUK, STEVE NAME 1.2 NAME 504 VILLAGE DRIVE # 504 2050 GLASS RD NE, #207 STREET ADDRESS 1.3 STREET ADDRESS FATRMONT, WV 86554 **CEDAR RAPIDS IO** CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE 21 TITLE v/s ROMANIUK, LISA 2.2 NAME NAME ROMANIUK 504 VILLA 2050 GLASS ROAD NE. #207 STREET ADDRESS 2.3 STREET ADDRESS **CEDAR RAPIDS IO** CITY-ST-ZIP 2.4 CITY-ST-ZIP FATRMONT, WY &L DELETE 31 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 14. Thereby certify that the information supplied with this filing goes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this around report of supplemental annual 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 12 or Block 13 if changed or out attachment with an address. STEVE ROMANIUK-