2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000083944

Entity Name: UNIVERSAL MANAGEMENT SYSTEMS CORPORATION

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
9235 8TH AVE JACKSONVILLE, FL 32208						
Current Mailing Address:			New Maili	New Mailing Address:		
9235 8TH AVE JACKSONVILLE, FL 32208						
FEI Number: 59-3343454 FEI Number Applied For () FEI Number			FEI Number Not App	mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
MILLS, GLEN W 9235 8TH AVE JACKSONVILLE, FL 32208 US						
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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
				15/CHANG		
Title: Name: Address: City-St-Zip:	D () De MILLS, JAELIN T 9235 8TH AVENUE JACKSONVILLE, F		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () De MILLS, SHIRLEY 4235 8TH AVENUE JACKSONVILLE, F		Title: Name: Address: City-St-Zip:	D MILLS, SHIF 9235 8TH A' JACKSONVI		
Title: Name: Address: City-St-Zip:	D () De MILLS, GLEN W 9235 8TH AVE JACKSONVILLE, F		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () De MILLS, MARK A 9235 8TH AVE JACKSONVILLE, F		Title: Name: Address: City-St-Zip:	D MILLS, MAR 2239 W. 17 JACKSONVI		
Title: Name: Address: City-St-Zip:	D () De SHAKIR, HANIF 111 PENN STREET CAMDEN, NJ 0810		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () De FALANA, STACY A 2239 W. 17TH ST. JACKSONVILLE, F		Title: Name: Address: City-St-Zip:		() Change () Addition	
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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						

SIGNATURE: GLEN W. MILLS D 04/29/2008

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.