

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000086981

FILED  
Jul 05, 2005  
Secretary of State

**Entity Name:** UNIVERSAL REBATE-REFUND-PREMIUM CENTER, INC.

**Current Principal Place of Business:**

99 NW 183RD STREET, #114  
MIAMI, FL 33139

**New Principal Place of Business:**

2850 EVANS STREET  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

99 NW 183RD STREET, #114  
MIAMI, FL 33139

**New Mailing Address:**

2850 EVANS STREET  
HOLLYWOOD, FL 33020

**FEI Number:** 65-0627266

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BECKER, VIVIAN L  
2850 EVANS STREET  
HOLLYWOOD, FL 33020 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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BECKER, VIVIAN L  
Address: 2850 EVANS STREET  
City-St-Zip: HOLLYWOOD, FL

Title: D ( ) Delete  
Name: FLEMING, SHIRLEY S  
Address: 2850 EVANS STREET  
City-St-Zip: HOLLYWOOD, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: SHIRLEY FLEMING

D

07/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date