

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000000554

1. Entity Name

UNIVERSAL C.F.S. CORPORATION

Principal Place of Business

7933 NW 21ST COURT  
MIAMI FL 33122  
US

Mailing Address

7933 NW 21ST COURT  
MIAMI FL 33122  
US

2. Principal Place of Business

7500 NW 54 ST  
Suite, Apt. #, etc.

3. Mailing Address

7500 NW 54 ST  
Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33166

Country

USA

Zip

33166

Country

USA

4. FEI Number

65-0629353

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

YEPES, CARLOS M  
15332 SW 39TH LANE  
MIAMI FL 33185

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE D  
NAME ESQUIVEL, JUAN C  
STREET ADDRESS 9911 N.W. 5TH LANE  
CITY-ST-ZIP MIAMI FL 33172 ☐ Delete

TITLE VP  
NAME ESQUIVEL, ROBERT  
STREET ADDRESS 15802 SW 79 TERR  
CITY-ST-ZIP MIAMI FL 33193 ☒ Delete

TITLE D  
NAME SALAZAR, ALFREDO  
STREET ADDRESS 6911 SW 71ST STREET  
CITY-ST-ZIP MIAMI FL 33143 ☐ 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 ESQUIVEL, JUAN C  
STREET ADDRESS 6911 SW 71ST  
CITY-ST-ZIP MIAMI, FL. 33143. ☒ 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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**  
**Jun 20, 2001 8:00 am**  
**Secretary of State**

06-20-2001 90011 004 \*\*\*550.00

C0071697



DO NOT WRITE IN THIS SPACE

0142056

CR2E034 (10/00)

6/15/01 (305) 594-0373

Date

Daytime Phone #