

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 20, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P96000017560

1. Entity Name  
UNIVERSAL AMUSEMENT CORPORATION



Principal Place of Business  
8315 N.W. 52ND PL.  
CORAL SPRINGS, FL 33067

Mailing Address  
8315 N.W. 52ND PL.  
CORAL SPRINGS, FL 33067



01172005 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0658208

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

PEREZ, MELVIN  
8315 N.W. 52ND PL.  
CORAL SPRINGS, FL 33067

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME PEREZ, MELVIN  
STREET ADDRESS 8315 NW 52 PL  
CITY-ST-ZIP CORAL SPRINGS, FL 33067

TITLE TS  
NAME WALECK, LISA  
STREET ADDRESS 8315 NW 52 PL  
CITY-ST-ZIP CORAL SPRINGS, FL 33067

TITLE VP  
NAME PEREZ, HIRAM  
STREET ADDRESS 13301 N.W. 8TH COURT  
CITY-ST-ZIP SUNRISE, FL 33325

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000187202  
01/24/05-80003-014 150.00

**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:

*Helvin Perez* Helvin Perez

1-17-05 (954) 346-4177

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #