


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northrup Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # PA000055013
 1. Corporation Name
UNIVERSAL SECURITIES ACCOUNTING, INC

97 OCT -6 PM 12:27
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 1014 RUSSELL DR UNIT HIGHLAND BEACH, FL 33487	Mailing Address 410 BRIAN TAMONEY 2200 N. FEDERAL HWY #228 BOCA RATON, FL 33431
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21. Principal Place of Business Suite, Apt. #, etc. City & State Zip	2a. Mailing Address Suite, Apt. #, etc. City & State Zip	24. Country	25. Country	29. Country	30. Country
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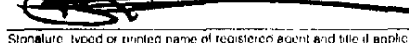
3. Date Incorporated or Qualified	3a. Date of Last Report
4. FEI Number 65-0677488	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name BRIAN C. TAMONEY
82 Street Address (P.O. Box Number is Not Acceptable) 2200 N. FEDERAL HWY #228
83
84 City Boca Raton
85 Zip Code FL 33431

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. I hereby accept the appointment as registered agent. I am resigning with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:  DATE: **9-5-97**

12. OFFICERS AND DIRECTORS

TITLE <input type="checkbox"/> DELETE	NAME	STREET ADDRESS	CITY-ST-ZIP
<input type="checkbox"/>	ROBERT DERRING	2593 HAMPTON CT	DELRAY BEACH, FL 33445
<input type="checkbox"/>	WILLIAM ARCHER	1014 RUSSELL DR	HIGHLAND BEACH, FL 33487
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or 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 on an attachment with an address.

SIGNATURE: **Will. K. Archer** DATE: **9-6-97**

CR2E034 (9/96)