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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999

## DOCUMENT # P9700049685 1. Corporation Name

UNIVERSAL OF COMMUNICATIONS, INC.

## **FILED** Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90087 001 \*\*\*150.00



1150 SW 2ND STREET #105  MAME FX 3174  1150 SW 2ND STREET #105  MAME FX 3174  1150 SW 2ND STREET #105  1150 SW 2ND STREET	Principal Place	of Business	Mailing Address		- I fådit dåt tim i stift i døtt antit gatti gatti gatti gres attal sesat at	AL PURE
2. Principal Place of Business 21   38.45 SW 9   10.60   20. Mailing Address 22   38.45 SW 9   10. Mark   10. Suite, April, #, 100.  23   38.45 SW 9   10. Mark   10. Suite, April, #, 100.  24   27   28   34.47 SW 9   37.60   3. Certificate of Status Desired   56.0763395   5. Certificate of Status Desired   56.1763395   5	11570 SW 2ND	STREET #105	11570 SW 2ND STREET #105			
2. Principal Place of Business 2.1   138 45 SW 9 STreet 2.2   2. Mailing Address   06(05)1997	MIAMI FE 33174	l e	MIAMI F2 33174		DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business 27.   38 45 SW 9 Street   2a Mailing Address Suria, Apt. #, etc.   2a    34 45 SW 9 Street   2a    55-0783395   Not Applicable Suria, Apt. #, etc.   2a    34 45 SW 9 Street   2a    55-0783395   Not Applicable Suria, Apt. #, etc.   2a    34 45 SW 9 Street   2a    55-0783395   Not Applicable Suria, Apt. #, etc.   2a    34 45 SW 9 Street   2a    34 55-0783395   Street Address   2a    2a    34 55-0783395   Street Address   2a    2a						
2. Principal Prilace of Business S 22					Table   Tabl	į
South, Apt. 4, etc.  27   Solide, Apt. 4, etc.  28   Solide, Apt. 4, etc.  27   Solide, Apt. 4, etc.  28   Solide, Apt. 4, etc.  29   Solide, Apt. 4, etc.  20   Solide, Apt. 4, etc.  20   Solide, Apt. 4, etc.  21   Solide, Apt. 4, etc.  22   Solide, Apt. 4, etc.  22   Solide, Apt. 4, etc.  22   Solide, Apt. 4, etc.  23   Man. 4, etc.  24   Solide, Apt. 4, etc.  25   Solide, Apt. 4, etc.  26   Solide, Apt. 4, etc.  27   Solide, Apt. 4, etc.  28   Solide, Apt. 4, etc.  29   Solide, Apt. 4, etc.  29   Solide, Apt. 4, etc.  20   Solide, Apt. 4, etc.  20   Solide, Apt. 4, etc.  21   Solide, Apt. 4, etc.  22   Solide, Apt. 4, etc.  22   Solide, Apt. 4, etc.  23   Apt. 4   Solide, Apt. 4, etc.  24   Solide, Apt. 4, etc.  25   Solide, Apt. 4, etc.  26   Solide, Apt. 4, etc.  27   Solide, Apt. 4, etc.  28   Solide, Apt. 4, etc.  29   Solide, Apt. 4, etc.  20   Solide, Apt. 4, etc.  20   Solide, Apt. 4, etc.  21   Solide, Apt. 4, etc.  22   Solide, Apt. 4, etc.  23   Apt. 4   Country  24   Solide, Apt. 4, etc.  25   Solide, Apt. 4, etc.  26   Solide, Apt. 4, etc.  27   Solide, Apt. 4, etc.  28   Solide, Apt. 4, etc.  29   Solide, Apt. 4, etc.  20   Name and Address of Country tax current appeared Solide, Apt. 4, etc.  21   App. 5   App	2. Principal Pla	ace of Business	2a. Mailing Address		A LEI Number	For
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City & State 23	Suite, Apt.		Suite, Apt. #, etc.		E Cortificate of Status Desired   30./3 Additio	
20   20   20   20   20   20   20   20	22				5. Certificate of States 505,100 E	<u> </u>
Zip   33   8 4   25   U.S.A   29   33   8 4   30   U.S.A   29   20   20   20   20   20   20   20	— A/I	Fl.	⊢¬ M. I	=1.	1 5 1 1 5 25	
20 Name and Address of Current Registered Agent  20 Name and Address of New Registered Agent  20 Name 2 LULAGA JULIO 11570 SW 2ND STREET #105 MIAMI FL 38174  ADDRESS  11570 SW 2ND STREET #105 MIAMI FL 38174  11. Pursuant to the provisions of Sections 607 0502 and 607 1506. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered orgent, and familiary and accept the obligations of Section 607,1506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered orgent, and familiary application. (In the state of Florida, Such change was additionable by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent. I am familiary application. (In the state of Florida, Such change was additionable by the corporation's board of directors. I hereby accept the appointment as registered office or registered adent in minimality.  20 OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. OFFICERS AND DIRECTORS	Zip	Country	—¬ ` ~~ 101/ —	· //(*/)		
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TILE POPULAGEA, JULIO  11570 SW 2ND STREET #105  MIAMI FL 33174  A DDRESS  A City M/Am.  FL 85 Zip Code  Street Address (P.O. Box Number is Ng) Acceptable)  ### ADDRESS  A City M/Am.  FL 85 Zip Code  ### ADDRESS  ADDITIONS/CHANGES to the purpose of changing is registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing is registered agent. I am familiar purpose and accept the obligations of, Section 607.0502 and 607.0505, Florida Statutes.  ### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  **CASTRO, ALVARO**  STREET ADDRESS  11570 SW 2ND STREET #105  11570 SW 2ND STREET #105  11570 SW 2ND STREET #105  22 NAME  23 NAME  11570 SW 2ND STREET #105  22 NAME  11570 SW 2ND STREET #105  22 NAME  11570 SW 2ND STREET #105  11570 SW 2ND STREET #105  22 NAME  11570 SW 2ND STREET #105  23 NAME  11570 SW 2ND STREET #105  24 NAME  11570 SW 2ND STREET #105  25 NAME  11570 SW 2ND STREET #105  26 NAME  11570 SW 2ND STREET #105  27 NAME  11570 SW 2ND STREET #105  28 NAME  11570 SW 2ND STREET #105  28 NAME  11570 SW 2ND STREET #105  29 NAME  11570 SW 2ND STREET #105  20 NAM		9. Name and Address of Current	Registered Agent	94 Nome	10. Name and Address of New Registered Agent	
11. Pursuant to the provisions of Sactions 607.0502 and 607.1508. Florida Statutes. the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. I am familiary and, and accept the obligations of, Section 607.0505. Florida Statutes.  11. Pursuant to the provisions of Sactions 607.0502 and 607.1508. Florida Statutes agent. I am familiary and, and accept the obligations of, Section 607.0505. Florida Statutes.  11. Pursuant to the provisions of Sactions 607.0502 and 607.1508. Florida Statutes agent agent of the purpose of changing its registered agent. I am familiary and, and accept the obligations of, Section 607.0505. Florida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CITY ST. 29  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDIT	71111	IAGA BILIO		oi Name _	ZULUAGA, TULIO	
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 his 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 familiary and accept the obligations of, Section 607 (0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiary present care of ingistered agent and title 4 speciation. (NOTE Requirement Agent syndhum required when reinitiating)  12.		n SW OND STREET #105	WANC O	82 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
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 his 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 familiary and accept the obligations of, Section 607 (0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiary present care of ingistered agent and title 4 speciation. (NOTE Requirement Agent syndhum required when reinitiating)  12.		AL FL 32174	MANDE	83	7 3/11ed	
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 his 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 familiary and accept the obligations of, Section 607 (0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiary present care of ingistered agent and title 4 speciation. (NOTE Requirement Agent syndhum required when reinitiating)  12.	INICAN	1111230117	ANDESS	<del> </del>		
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, 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, 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, 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, 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, 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, or both agent agent and state of Florida. Such change agent, and accept the obligations of Social 670.050. Florida Statutes.  It is provided the appointment as registered agent a			ABoicess	84 City		u l
office or registered agent, or both, in the State of Floride, Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent agen			I 607 1500 Florido Statutas	the phase named or	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
agent. I am familiary and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signatura (page 1) printed name of registered spent and 350 if applicable.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE PSD DELETE 11TILE PSD CASTRO, ALVARO 12 MAME CASTRO, ALVARO 11570 SW 2ND STREET #105 1.3 STREET ADDRESS 1.3 S	office or re	egistered agent, or both, in the State of	f Florida. Such change was autho	orized by the corpora	ation's board of directors. I hereby accept the appointment as registere	ed
12.	agent. I ar	m familiar and accept the obligation	ons of, Section 607.0505, Florida	Statutes.		•
12.	SIGNATURE	Signature throad a granted name of registered agent a	and title if applicable (NOTE: Red	nistered Agent signature regu	uired when reinstating) DATE	_
TITLE						V 12
NAME   CASTRO, ALVARO   12 NAME   13 STREET #105   13 S		PSD	☐ DELETE	1.1 TITLE	PSD - Change □	
11570 SW 2ND STREET #105	NAME	, . <del></del>		1.2 NAME	CASTRO, ALVARO	
MIAMI FL 33174	STREET ADDRESS			1.3 STREET ADDRESS	13845 5W 9 Street	
TITLE					Miani FL 33/84-3020	
NAME   ZULUAGA, JULIO   11570 SW 2ND STREET #105   23 STREET ADDRESS   11570 SW 2ND STREET #105   23 STREET ADDRESS   2.4 CITY-ST-ZIP   MIAMI FL 33174   24 CITY-ST-ZIP   31 NTILE   31 NTILE   32 NAME   32 NAME   32 NAME   33 STREET ADDRESS   34 CITY-ST-ZIP   11TLE   1			☐ DELETE		/TO Change	Addition
STREET ADDRESS   11570 SW 2ND STREET #105	NAME			2.2 NAME	ZULUAGA, TULIO	
TITLE	STREET ADDRESS	•		2.3 STREET ADDRESS	13845 SW 9 Street	
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14. 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 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 exemption of the corporation of the corp

SIGNATURE:

CONTRACTOR STATES SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR