561-747-4684 , Daytime Phone #

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

200	2 UNI	FORM BUSIN	<u> </u>	FILED								
DOCUMENT # P97000087768 1. Entity Name							Jan 28, 2002 8:00 am Secretary of State					
UNIVERS	SAL COLL	ISION, INC.						28-2002 9				•
Principal Place of Business 134 FERN ST JUPITER FL 33458			Mailing Address 134 FERN ST JUPITER FL 33458				1 1 00 11 00 1 31 0 1 0 131 1	18 11 18 141 18 141	10411 24 181 121	II 1 36 11 3881 3	1 8 11 18 11 1811 18 11	
2. Principal F	Place of Busin	ess	3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & Stat	te -		City & State			4.	4. FEI Number Applied For Not Applied For					
Zip Country			Zip	ntry	5 Certificate of Status Desired S8.75 Additio						-	
6. Name and Address of Current Registered Agent						7.	Name and Address	of New Regi		e Require ent	a .	1
					Name.							
EDLER, RAY A 134 FERN ST					Street Address (P.O. Box Number is Not Acceptable)							
JUPITER FL 33458												
					City			•	FL	Zip Cod	е	
8. The above	e named entity	submits this statement for th	e purpose of changing its	s register	ed office or r	egistered aç	gent, or both, in the S	tate of Florid	a.		ŕ	
JUNATURE	Signature, typed	or printed name of registered agent and	title if applicable. (NOT	TE: Registere	d Agent signature	required when r	einstating)		DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After May 1, 200 Make Check Payable				02 Fee	will be \$55	Ó.00	10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees					
11.	·	OFFICERS AND DIF		12.			 DDITIONS/CHANGE:	S TO OFFICE	RS AND D	RECTORS	S IN 11	-
TITLE NAME	D EDLER, R	AY A	☐ Delete	TITLI	1] Change	☐ Addition	(10/6)
STREET ADDRESS CITY-ST-ZIP	326 JUPN Jupiter 1	ER LAKE BLVD. #2301B FL 33458			ET ADDRESS -ST-ZIP							CR2E03
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TITLE NAME			☐ Delete	TITLE] Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP				STRE	ET ADDRESS -ST-ZIP							
indicated of the cor	on this report poration or th	information supplied with this t or supplemental report is tru e receiver or trustee empowe chment with an address, with	e and accurate and that r red to execute this report	my signat as requi	ture shall hav	e the same	legal effect as if mad	le under oath	; that I am	an officer	or director	