

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000007475

FILED  
Mar 16, 2004  
Secretary of State

Entity Name: UNIVERSAL PHONE CARD, CORP.

## Current Principal Place of Business:

900 W. 49 ST  
302  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

900 W. 49 ST  
302  
HIALEAH, FL 33012

## New Mailing Address:

FEI Number: 65-0822478      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUQUE, JOHN  
1387 NW 165TH AVE.  
PEMBROKE PINES, FL 33028      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DUQUE, JOHN  
Address: 12680 NW 11 COURT  
City-St-Zip: SUNRISE, FL 33323

Title: VD ( ) Delete  
Name: DE LOS SANTOS, FRANKLIN  
Address: 15651 SW 112 WAY  
City-St-Zip: MIAMI, FL 33196

Title: TD ( ) Delete  
Name: SANCHEZ, JULIAN  
Address: 12680 NW 13 COURT  
City-St-Zip: SUNRISE, FL 33323

Title: SD ( ) Delete  
Name: HERNANDEZ, JULIAN  
Address: 2550 NW 13 STREET, NO. 335  
City-St-Zip: MIAMI, FL 33125

Title: D ( ) Delete  
Name: PORTILLO, JOSE O  
Address: 15288 SW 104TH STREET, #314  
City-St-Zip: MIAMI, FL 33146

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DUQUE, JOHN  
Address: 1387 NW 165 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN J DUQUE

P

03/16/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date