UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000044577

FILED May 14, 2002 8:00 am Secretary of State

UNIVERSAL TOWERS CONSTRUCTION, INC.							05-14-2002 90568 001 ***150.00 05-14-2002 90568 002 *****8.75				
Principal Place of Business 7800 UNIVERSAL BLVD. ORLANDO, FL 32819			Mailing Address 7800 UNIVERSAL BLVD. ORLANDO, FL 32819								
2. Principal	Place of Busin	ess	3. Mailing Address	<u> </u>							
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State				4. FEI Number Applied For 59-3517741 Not Applicable				
Zip	Country		Zip	Country		ľ	Certificate of Status Desired	Ľ¥	\$8.75 A	dditional	
6. Name and Address of Current Re			gistered Agent			7. 1	7. Name and Address of New Registered Agent				
TRINDADE, JR., ALUIZ						Name					
7800 UN	NIVERSAL	BLVD.	Street Address			Address (P.O. B	(P.O. Box Number is Not Acceptable)				
OKLANDO), FL 32	819		ļ				·			
					City			FL	Zip Co	de	
8. The above	e named entity	submits this statement for	the purpose of changing its	registere	d office o	r registered ago	ent, or both, in the State of Flori	da.			
SIGNATURE		or printed name of registered agent an	nd tille if applicable. (NOT	E: Registered	Agent signat	ure required when re	instating)	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			550.00	Election Campaign Finar Trust Fund Contribution.	ncing		00 May Be d to Fees	
11.		OFFICERS AND D	IRECTORS	12.		AD	DITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 11	
TITLE NAME	PD RIBEIRO), JOAO A.	☐ Delete	TITLE NAME					☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP		NIVERSAL BLVD. D. FL 32819		STREET CITY-S	T ADDRESS ST-ZIP						
TITLE	STD		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME:	ZANCHET	Γ. ZILBERTO		NAME							
STREET ADDRESS		IIVERSAL BLVD.		STREET	ADDRESS					ļ	
CITY-ST-ZIP), FL 32819		CITY-S	ST-ZIP					1	
TITLE			☐ Delete	TITLE		VP	****		☐ Change	Addition	
NAME				NAME			E, JR., LUIZ		☐ Onlingt	Addition	
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Street address				1	ADDRESS						
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NAME			- Delete	NAME					☐ Change	☐ Addition (
STREET ADDRESS					address						
CITY-ST-ZIP				CITY-SI						[.	

13. 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 11 or Block 12 if changed, or on an attachment with agraddress, with all other like empowered.

SIGNATURE:

1. Entity Name

ALRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUIZ TRINDADE, UR., VP

4/29/2002

407-248-8877

Daytime Phone #

R2E034 (11/00)