


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000044577 1. Entity Name UNIVERSAL TOWERS CONSTRUCTION, INC.	
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Principal Place of Business 7800 UNIVERSAL BLVD. ORLANDO, FL 32819	Mailing Address 7800 UNIVERSAL BLVD. ORLANDO, FL 32819
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04212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3517741	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent TRINDADE, JR, LUIZ 7800 UNIVERSAL BLVD ORLANDO, FL 32819
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIBEIRO, JOAO A 7800 UNIVERSAL BLVD ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ZANCHET, ZILBERTO 7800 UNIVERSAL BLVD ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS RIBEIRO, SILVIA 7800 UNIVERSAL BLVD ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: L. Trindade **LUIZ TRINDADE JR** **ASSET MANAGER** **4/27/04 (407) 781 2132**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #