2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048583

Entity Name: UNIVERSAL ENVIRONMENTAL SERVICES INC.

FILED Jun 02, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2101 SW SAVAGE BLVD 136 N E 4TH AVENUE

PORT ST. LUCIE, FL 34953 US DEERFIELD BEACH, FL 33441 US

Current Mailing Address: New Mailing Address:

2101 SW SAVAGE BLVD 136 N E 4TH AVENUE

PORT ST LUCIE, FL 34953 US DEERFIELD BEACH, FL 33441 US

FEI Number: 65-0843917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COHEN, MAURICE AVITAN, DORON 2101 SW SAVAGE BLVD 136 N E 4TH AVENUE

PORT ST. LUCIE, FL 34953 US DEERFIELD BEACH, FL 33441 US

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: D AVITAN 06/02/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P (X) Change () Addition

 Name:
 BISSOON, HARNARINE
 Name:
 AHARON, GILI

 Address:
 2120 SUNSET STRIP
 Address:
 136 N E 4TH AVENUE

City-St-Zip: SUNRISE, FL 33316 US City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: DPST () Delete Title: VPT (X) Change () Addition

 Name:
 COHEN, MAURICE
 Name:
 COHEN, MAURICE

 Address:
 2101 SW SAVAGE BLVD
 Address:
 2101 SW SAVAGE BLVD

 City-St-Zip:
 PORT ST. LUCIE, FL 34953 US
 City-St-Zip:
 PORT ST. LUCIE, FL 34953 US

Title: () Delete Title: S () Change (X) Addition

Name: Name: AVITAN, DORON
Address: Address: 136 N E 4TH AVENUE

City-St-Zip: City-St-Zip: DEERFIELD BEACH, FL 33441 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: G AHARON P 06/02/2008