

# 2000 UNIFORM BUSINESS REPORT (UBR)

5/19/2000 00:00:00

DOCUMENT # P98000082255

1. Entity Name

UNIVERSAL SECURITY AND INVESTIGATIONS, INC.

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-02-2000 90043 006 \*\*\*150.00

Principal Place of Business  
2621 SOUTH ORLANDO DRIVE  
SUITE 8  
SANFORD FL 32773

Mailing Address  
2621 SOUTH ORLANDO DRIVE  
SUITE 8  
SANFORD FL 32771-4232

2. Principal Place of Business  
700 W. 25th ST.  
Suite, Apt. #, etc.

3. Mailing Address  
700 W. 25th ST.  
Suite, Apt. #, etc.

City & State  
Sanford FL

City & State  
Sanford, FL

Zip  
32771

Country  
USA

Zip  
32771

Country  
USA

4. FEI Number  
59-3533635

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
WRIGHT, JOHN JR.  
2621 SOUTH ORLANDO DRIVE  
SUITE 8  
SANFORD FL 32773

700 W 25th Street

7. Name and Address of New Registered Agent  
Name  
Special & Ultra P.A.  
Street Address (P.O. Box Number is Not Acceptable)  
700 W 25th St 343  
343 AMERICA AVE.  
City  
Sanford Coral Gables, FL  
FL  
Zip Code  
33134

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.

SIGNATURE  DATE 15 May 2000

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2000 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WRIGHT, JOHN JR.		NAME		
STREET ADDRESS	2621 SOUTH ORLANDO DRIVE, STE 8		STREET ADDRESS	700 W 25th Street	
CITY-ST-ZIP	SANFORD FL 32773		CITY-ST-ZIP	Sanford, FL 32771	
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WRIGHT, BEVERLY S		NAME	SECRETARY	
STREET ADDRESS	2621 SOUTH ORLANDO DRIVE, STE 8		STREET ADDRESS	700 W 25th St	
CITY-ST-ZIP	SANFORD FL 32773		CITY-ST-ZIP	Sanford, FL 32771	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9 Feb 2000

Date

407 321-2191

Daytime Phone #

CR2F034 (9/99)