APR-25-2003 12:18 EMPIRE CORP

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May 01, 2003 8:00 am
Secretary of State
05-01-2003 90910 001 ***476.25

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99 000088650

1. Entity Name: Universal I.T. Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 7154 N. UNIVERSITY DR #	3. Mailing Address: SAME
Suite, Apt. #, etc.: 124	Suite, Apt. #, etc.: SAME
City & State: TAMARAC	City & State: SAME
Zip: 33321 Country: BROWARD	Zip: SAME Country: SAME

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0952998 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

7. Name and Address of Current Registered Agent
Name: MAHBOUB BENCHIMOL
Street Address (P.O. Box Number is Not Acceptable): 1802 NORTH UNIVERSITY DR #128
City: PLANTATION FL Zip Code: 33322

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.

SIGNATURE: MAHBOUB BENCHIMOL AS PRESIDENT OF UNIVERSAL IT INC
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

[illegible] 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

TITLE	PRESIDENT	TITLE	
NAME	MAHBOUB BENCHIMOL	NAME	
STREET ADDRESS	1802 NORTH UNIVERSITY DR #128	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33322	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: MAHBOUB BENCHIMOL AS PRESIDENT 04/29/03 45467309 82
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

TOTAL P.02