

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000167

FILED
Apr 04, 2007
Secretary of State

Entity Name: UNIVERSIDAD FLET, INC.

Current Principal Place of Business:

14540 SW 136 ST STE 202
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

14540 SW 136 ST STE 202
MIAMI, FL 33186

New Mailing Address:

14540 SW 136 ST STE 108
MIAMI, FL 33186

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDRADE, MERCEDES
14540 SW 136 ST STE 202
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

ANDRADE, MERCEDES
14540 SW 136 ST STE 108
MIAMI, FL 33186 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: _____ 04/04/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BEATTY, DR ROBERT
Address: 10500 NW 21 CT
City-St-Zip: SUNRISE, FL 33322

Title: C () Delete
Name: BALDWIN, JULIA
Address: 13780 NW 19 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: HUNTLEY, BARBARA
Address: 18101 SW 83 CT
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: CUEVAS, GILBERT J
Address: 12430 SW 106 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: P () Delete
Name: LARRY, MCCULLOUGH
Address: 9547 SW 148 AVE CIR.N
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HUNTLEY, BARBARA
Address: 910 TIMBERLINE DRIVE
City-St-Zip: LENOIR CITY, TN 37772

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MERCEDES ANDRADE CFO 04/04/2007
Electronic Signature of Signing Officer or Director Date