FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 08, 1999 8:00 am
Secretary of State
04-08-1999 90108 049 ***150.00

DOCUMENT # **374974**

1. Corporation Name
UNITED STATES WARRANTY CORP.

Principal Place of Business	Mailing Address
1801 E. ATLANTIC BLVD POMPANO BEACH FL 33060	1801 E. ATLANTIC BLVD POMPANO BEACH FL 33060

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 22 NE 22nd Avenue Suite, Apt. #, etc. 22 City & State 23 Pompano Beach, FL Zip 24 33062 Country 25 USA	2a. Mailing Address 26 22 NE 22nd Avenue Suite, Apt. #, etc. 27 City & State 28 Pompano Beach, FL Zip 29 33062 Country 30 USA

3. Date Incorporated or Qualifed: 12/29/1970

4. FEI Number: 59-1651866 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DAVIS, WILLIAM F. III
1801 E ATLANTIC BLVD
POMPANO BCH. FL 33060

10. Name and Address of New Registered Agent

81 Name: WILLIAM F. DAVIS III
82 Street Address (P.O. Box Number is Not Acceptable): 22 NE 22nd Avenue
83
84 City: Pompano Beach FL 85 Zip Code: 33062

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DAVIS, WILLIAM F. 1801 E ATLANTIC BLVD POMPANO BCH. FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	WILLIAM F. DAVIS CD 22 NE 22nd Avenue Pompano Beach, FL 33062 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SILVERMAN, LORI A. 2221 CYPRESS ISLAND DR POMPANO BCH FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	P WILLIAM F. DAVIS III 5611 Winston Park Blvd. North Coconut Creek, FL 33073 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MACEK, MARK A. 2700 SE 6 ST POMPANO BCH FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	T JAMES J. SMOLICH 11333 Lakeview Drive Coral Springs, FL ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lori A. Silverman LORI A. Silverman 1/5/99 954-784-9400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)