

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000038080

FILED
Feb 03, 2004
Secretary of State

Entity Name: UNITED WE INVEST, INCORPORATED

Current Principal Place of Business:

PO BOX 941930
MAITLAND, FL 327941930

New Principal Place of Business:

Current Mailing Address:

PO BOX 941930
MAITLAND, FL 327941930

New Mailing Address:

FEI Number: 04-3651897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MESSING, DOROTHY M
2824 YONKERS COURT
221 RAINTREE DRIVE
CASSELBERRY, FL 32707

Name and Address of New Registered Agent:

MESSING, DOROTHY M
221 RAINTREE DRIVE
CASSELBERRY, FL 32707

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:

02/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPIC () Delete
Name: MESSING, JAMES W
Address: PO BOX 941930
City-St-Zip: MAITLAND, FL 327941930

Title: DV () Delete
Name: SOGOLOW, DANIEL I
Address: 703 SANTE FE LANE
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: JAMES W. MESSING

DPIC

02/03/2004

Electronic Signature of Signing Officer or Director

Date