

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
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90042 004 ***150.00

DOCUMENT # P95000030947

1. Corporation Name
UNOVERICA CORPORATION

Principal Place of Business

6731 BANNER LAKE CIRCLE
SUITE 12206
ORLANDO FL 32821

Mailing Address

6731 BANNER LAKE CIRCLE
SUITE 12206
ORLANDO FL 32821

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/20/1995

4. FEI Number

59-3309718

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 8749 ALEGRE CIRCLE

Suite, Apt. #, etc.

22 City & State

23 ORLANDO, FL

Zip Country

24 32836

25

2a. Mailing Address

26 8749 ALEGRE CIRCLE

Suite, Apt. #, etc.

27 City & State

28 ORLANDO, FL

Zip Country

29 32836

30

9. Name and Address of Current Registered Agent

HAROLD, ERIC G.
6731 BANNER LAKE CIRCLE #12206
ORLANDO FL 32821

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

8749 Alegre Circle

83

84 City Orlando

FL

85 Zip Code

32836

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME HAROLD, ERIC G
STREET ADDRESS 6731 BANNER LAKE CIRCLE, SUITE 12206
CITY-ST-ZIP ORLANDO FL 32821

TITLE T ☐ DELETE

NAME HAROLD, YUKO A
STREET ADDRESS 6731 BANNER LAKE CIRCLE, SUITE 12206
CITY-ST-ZIP ORLANDO FL 32821

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

8749 Alegre Circle
Orlando, FL 32836

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

8749 Alegre Circle
Orlando, FL 32836

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

YUKO HAROLD

Date

4/29/99

Daytime Phone #

(407) 909-1330

CR2E034 (11/98)