

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25133

FILED
Apr 30, 2004
Secretary of State**Entity Name:** UNI-GROUP USA, INC.**Current Principal Place of Business:**4362 NORTHLAKE BLVD.,
SUITE 204
PALM BEACH GARDENS, FL 33410 US**New Principal Place of Business:****Current Mailing Address:**4362 NORTHLAKE BLVD.,
SUITE 204
PALM BEACH GARDENS, FL 33410 US**New Mailing Address:****FEI Number:** 65-0107002**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CIKLIN, ALAN J.
NORTHBRIDGE TOWER I, 19TH FLOOR
515 NORTH FLAGLER DRIVE
W. PALM BEACH, FL 33401 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: WILHELMS, MARK
Address: 12901 ST. CHARLES ROCK RD.
City-St-Zip: BRIDGETON, MO**Title:** VPD () Delete
Name: NICOLAI, LARRY
Address: 45 POWER RD
City-St-Zip: WEST FORD, MA**Title:** PD () Delete
Name: BERRY, STEVE
Address: 7167 INTERPACE RD
City-St-Zip: WEST PALM BEACH, FL 33407**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE BERRY

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date