

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90011 009 ***150.00

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1. Entity Name

UNIPOWER CORPORATION



Principal Place of Business

3900 CORAL RIDGE DR.
CORAL SPRINGS FL 33065

Mailing Address

3900 CORAL RIDGE DR.
CORAL SPRINGS FL 33065



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

City & State

4. FEI Number

65-0080704

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD, #221E
PALM BEACH GARDENS FL 33410

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CD ☐ Delete
NAME PALMER, CHARLES
STREET ADDRESS 312 S.E. 17TH STREET, STE. 300
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE PD ☐ Delete
NAME MERINO, JOSE
STREET ADDRESS 3900 CORAL RIDGE DR.
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE STD ☐ Delete
NAME FLETCHER, RAYMOND
STREET ADDRESS 312 S.E. 17TH STREET, STE. 300
CITY-ST-ZIP FT. LAUDERDALE FL 33016

TITLE D ☐ Delete
NAME BERGONIA, R. DAVID
STREET ADDRESS 125 S. LASALLE STREET, STE. 4000
CITY-ST-ZIP CHICAGO IL 60603

TITLE D ☐ Delete
NAME UNDERWOOD, ROBERT
STREET ADDRESS 125 S. LASALLE STREET, STE. 4000
CITY-ST-ZIP CHICAGO IL 60603

TITLE D ☐ Delete
NAME SCHNEIDER, EDWARD
STREET ADDRESS 3900 CORAL RIDGE DR.
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☐ Change ☒ Addition
NAME BIANCA G. Pucci
STREET ADDRESS 3900 CORAL RIDGE DR.
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE ☐ Change ☒ Addition
NAME F. JAY HESS VP. OF OPERATIONS
STREET ADDRESS 3900 CORAL RIDGE DR.
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE ☐ Change ☒ Addition
NAME MARK HART VP. OF SALES
STREET ADDRESS 3900 CORAL RIDGE DR.
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE ☐ Change ☒ Addition
NAME DALE GUILFORD VP. OF SALES
STREET ADDRESS 3900 CORAL RIDGE DR.
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-06

346 2442

Date

Daytime Phone #