## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morlham Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1996 DOCUMENT #

531577

(5)

1. Corporation Name UTF CORPORATION  Principal Place of Business 701 BRICKELL AVE STE 1300 MIAMI FL 33131  MIAMI FL 33131  MIAMI FL 33131					
V11.				3. Date Incorporated or Qualified 04/14/1977	3a. Date of Last Report 02/08/1995
2. Principal Plai	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
1. Suite, Apt. #	. etc	Suite, Apt. #, etc.		59-1734093	Not Applicab
<u>.</u>		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May 80
3   Ζιρ	Country	28		Trust Fund Contribution	Added to Fees
I) Zip	Country 25	Zip <b>29</b>	Country	8. This corporation has liability for in	
<u> </u>	9. Name and Address of Curre		[30]	Florida Statutes 💢 Yes  10. Name and Address of New R	
			81 Name	10. Harris and Francisco of their In	edigrator whatir
	SIDNEY		82 Street Add	Iress (P.O. Box Number is Not Acceptable	ila)
	RICKELL AVE STE 1300			11655 (F.O. DON HOLHOGE IS HOL ACCEPTAGE	ie)
SUITE			83		<del> </del>
MAMI r	FL 33131		84 City		85 Zip Code
1 Dureuant to	the excitations of Sections 607.050	20 - 1007 4E00 Florida State	don the share seed	<del></del>	<u> </u>
or registered	d agent, or both, in the State of Flor	)2 and 607 1508, Fiorida Statu rida. Such change was authori	ites, the above-named corpo- ized by the corporation's boa	oration submits this statement for the purpard of directors. I hereby accept the appo	pose of changing its registered officintment as registered agent, I am
rany isindar	n, and accept the obligations of, Sec	ction 607.0505, Florida Statute	es.		MITTER AD TOGRESO DE DEC
SIGNATURE	Signature, typed or printed name of registered age:			The transfer of the said	
SIGNATURE SI	Signature, typed or printed name of registered age OFFICERS AN		NOTE: Registered Agent signature require		DATE ICERIS AND DIRECTORS IN 12
SIGNATURE SI	Signatura, typed or prints a name of registered age: OFFICERS AN	art and title if appicable (N	NOTE: Registered Agent signature require	ad when renstating) ADDITIONS/CHANGES TO OFFIC	
SIGNATURE si 2. DILE AME	OFFICERS AND DOMB, SIDNEY	rit and titir if applicable (N ND DIRECTORS	NOTE: Registered Agent signature requi o		ICERS AND DIRECTORS IN 12
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/96

(305)358-7711