FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

667218 **UNITED BUSINESS CORPORATION** (2)

FILED Feb 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 8095 N W 98TH STREET 8095 N W 98TH STREET

HIALEAH GARDENS FL 33016		HIALEAH GARDENS FL 33016		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 03/27/1980	
	lace of Businoss	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2046910	Not Applicable
Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zφ	Country	,	8. This corporation owes or has paid the current	nt year Intangible
24	26		0			Yes No
	9, Name and Address of Curren	t Registered Agent		r	10. Name and Address of New Registered Ag	ent
	ATTEI, JAMES S		81	Name		
	95 N W 98TH STREET		82	Street A	ddress (P.O. Box Number is Not Acceptable)	
	NLEAH GARDENS, FL					
33	016		63			
			84	City		85 Zip Code
					┡┖	, i
OHICE OF H	to the provisions of Sections 607.050; egistered agent, or both, in the State m familiar with, and accept the obliga	or Fiorida, Such change was au	(norizea b)	r the corpo	corporation submits this statement for the purpose of cloration's board of directors. I hereby accept the appoin	hanging its registered ntment as registered
SIGNATURE						
	Signature, typed or printed name of registered age	nt and blood applicable (NOTE F	Angistered Age	ni signature re	equired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	DP	☐ DELFTE	1.1 TITLE	-		Change
NAME	MATTEI, JAMES S		1.2 NAME	ĺ		
STREET ADDRESS	8095 N W 98TH STREET		1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI, FL 00000		1.4 CITY-S	T- 21P		
TITLE		☐ DELETE	2 1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-ST-ZIP			2 4 CITY 5	T-ZIP		
TITLE [DELETE	3 1 TITLE			Change Addition
NAME			32 NAME	1		
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY - S	T-ZIP		
TITLE		☐ DELETÉ	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	address		
CITY-ST-ZIP			4.4 CITY - S	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S	T-ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME	ĺ		;
STREET ADDRESS			63 STREET	ADDRESS		
COTY ST. 710			C 4 OITY C			

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 eath; 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.

1 9 JAN 1998