

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005139

Entity Name: UNISPHERE OF FLORIDA, INC.

FILED
Jul 25, 2006
Secretary of State

Current Principal Place of Business:

648 SNUG ISLAND
CLEARWATER, FL 33767

Current Mailing Address:

648 SNUG ISLAND
CLEARWATER, FL 33767

New Principal Place of Business:

14955 GULF BOULEVARD
SUITE 14
MADEIRA BEACH, FL 33708 US

New Mailing Address:

14955 GULF BOULEVARD
SUITE 14
MADEIRA BEACH, FL 33708 US

FEI Number: 42-1584498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LATZO, TAMI LEE
14955 GULF BLVD., #14
MADEIRA BEACH, FL 33708 US

Name and Address of New Registered Agent:

LATZO, TAMI L
14955 GULF BOULEVARD
SUITE 14
MADEIRA BEACH, FL 33708 US

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: TAMI LEE LATZO

07/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: HIGGINS, DONALD
Address: 648 SNUG ISLAND
City-St-Zip: CLEARWATER, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: HIGGINS, DONALD
Address: 648 SNUG ISLAND
City-St-Zip: CLEARWATER, FL 33767 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD HIGGINS

PRES

07/25/2006

Electronic Signature of Signing Officer or Director

Date