

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004929

FILED
Feb 18, 2009
Secretary of State

Entity Name: UNICON GROUP LTD. CORPORATION

Current Principal Place of Business:

900 S0. HIGHWAY DR. SUITE 310
FENTON, MO 63026

New Principal Place of Business:

900 S. HIGHWAY DR.
SUITE 310
ST LOUIS, MO 63026 US

Current Mailing Address:

900 S0. HIGHWAY DR. SUITE 310
FENTON, MO 63026

New Mailing Address:

900 SOUTH HWY DR
SUITE 310
FENTON, MO 63026 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD. STE 101
TALLAHASSEE, FL 323012960 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPS () Delete
Name: ORLANDO, MICHAEL A
Address: 900 S0. HIGHWAY DR. SUITE 310
City-St-Zip: FENTON, MO 63026

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ORLANDO, MICHAEL
Address: 900 S. HIGHWAY DR. SUITE 310
City-St-Zip: ST LOUIS, MO 63026

Title: S () Change (X) Addition
Name: ORLANDO, MICHAEL
Address: 900 S. HIGHWAY DR. SUITE 310
City-St-Zip: ST LOUIS, MO 63026

Title: D () Change (X) Addition
Name: ORLANDO, MICHAEL
Address: 900 S. HIGHWAY DR. SUITE 310
City-St-Zip: ST LOUIS, MO 63026

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL A. ORLANDO

P

02/18/2009

Electronic Signature of Signing Officer or Director

Date