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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 21 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F20767

(2)

UNI - MED INTERNATIONAL CORPORATION

Prin	ncinal Plac	e of Busines	:0	Mailing Address	Mailing Address				{				
	•		5										
700 NW 214 ST. #122				PO BOX 331120 MIAMI FL 33233-11	PO BOX 331120 MIAMI FL 33233-1120								
MIA	AMI FL 3316	69										<del> </del>	
US									02/23/1981 03/		ate of Last Report /27/1996		
_	Principal Pl	Place of Busir	iess	2a. Mailing Addres	38				4. FEI Number	-	Ap	oplied For	
21				26								ot Applicable	
22				27	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
23	City & State			City & State	<del>-</del>				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t		
	Zip		Country	Zip					This corporation has liability for in				
24	-,		25	29	29 30					Tangible ta Yes		. 199.05∠,	
				rent Registered Agent	11				10. Name and Address of New Reg				
	SPE	ENCER, RIC	CHARD T.			81	Name	e					
	3641 N. 47TH AVE.						Stree	Addre:	ss (P.O. Box Number is Not Acceptabl	<u> </u>	<del></del>		
		LLYWOOD				82	000	I Addie.	ss (F.O. DOX MULLIDOL IS HOL MODERADI	θ)			
			_			83					*****		
						84	City				85 Zip (	Code	
			<u></u>				"			FL	'		
11.	Pursuant t	to the provise	Joris of Sections 607.0	0502 and 607 1508, Florida	Statutes, th	ne above	e-name	d corpo	ration submits this statement for the pu	urpose of c	hanging it	s registered	
	agent. Lar	im familiar wi	ith, and accept the ob	ale of Florida, South Change digations of, Section 607 of	3 was autrio 505, Florida	Statutes	/≀necco S.	прогано	on's board of directors. I hereby accept	the appoi	niment as	registerea	
SIG	NATURE												
		Signature typical	diocipanted name of registered :				ant signaru	ure required	d when reinstating)	DATE			
12.	·	PSD	Officers A	AND DIRECTORS  DELE		13.		<del></del>	ADDITIONS/CHANGES TO OFFICE				
			ER, RICHARD T.	L DIE						L	i Change	Addition	
NAM		l .	:r, nichand i. 47TH AVE.			1.2 NAME		.					
	ET ADDRESS	l .	VOOD FL 33021			1.3 STREET		·					
TITLE	-ST-ZIP	T	OOD FL SOLE	☐ DELE		1.4 CITY - S 2.1 TITLE	iT-ZIP	-		r	Change	Addition	
NAME		SPENCE	R, RICHARD T.	had - rive		2.2 NAME				<b>-</b>		L. Roomon	
	ET ADDRESS	L	47TH AVE.		l l	23 STREET	CADDRESS						
	- ST - ZIP		VOOD FL 33021			2 4 CITY-5		<b>'</b>					
TITLE		V		DELE		3.1 TITLE	JI-En	-			Change	Addition	
NAME	E	SPENCE	ER, ANDREA B.		E E	3 2 NAME						******	
STRE	EET ADDRESS		47TH AVE.			3 3 STREET	ADDRESS	3					
CITY	- ST - ZIP	l .	VOOD FL 33021		i i	3.4 CITY-5							
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NAM	E				}	4. 2 NAME							
STRE	ET ADDRESS	İ				4.3 STREET	ADDRESS	3					
CITY	- ST - 7IP					44 City-S	ST-ZIP						
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NAME	É	ĺ			1	5 2 NAME							
STRE	ET ADDRESS				!	53 STREET	ADDRESS	3					
	- ST - Z(P	*******	·· ·····			54 CITY-S	ST - ZiP						
TITLE				☐ DELE	ETE (	61 TITLE				L	Change	Addition	
NAME		ĺ				62 NAME		-					
	ET ADDRESS				1	63 STREET	ADDRESS	3					
	-ST-ZIP		7 -1 - 1-F	State of the file of the state of		64 CITY-S			-			······································	
14.	information I am an of	on indicated o Officer or direc	on this annual report o eter of the corporation	or sunniemental angual red	oort is true a empowered	and accu I to exec	urate ac	nd that n	in Section 119.07(3)(i), Florida Statutes ny signature shall have the same legal as required by Chapter 607, Florida St	affort as if	f mada una	der oath; that name	