SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

Jul 25 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1997 DOCUMENT # F9500005646 (3) UNIVERSAL NETWORK, INC. OF OHIO Principal Place of Business Mailing Address 5647 BENEVA RD 5647 BENEVA RD **SARASOTA FL 34233-4103 SARASOTA FL 34233-4103** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 11/17/1995 4. FEI Number 03/25/1996 2. Principal Place of Business Applied For 2a. Mailing Address 21 26 Not Applicable 31-1434833 Suite Apt. #. etc. Suite Apt # etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name MEREDITH, RON 5647 BENEVA RD 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34238 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE ((NOTE: Registered Agent signature required when re-instating 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 9/9/ Addition TITLE DELETE 1.1 TO LE Change NAME MEREDITH, RON 1.2 NAME 4009 LANCASTER DR STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34229 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE Addition 2.1 TITLE NAME MEREDITH, JUDY 2.2 NAME 4009 LANCASTER DR STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34229 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE BARTLEY, BILL NAME 3.2 NAME 5487 ATHENS WALNUT HILL RD STREET ADDRESS 3.3 STREET ADDRESS **LEXINGTON KY 40512** CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZIP

14. I do 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 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

07/22/97

(141)924-7400

appears in Block 12 or Block 13 if changed, on an attachment with an address

SIGNATURE:

FILED