

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra D. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F96000001742**

1. Corporation Name

Unicorn Worldwide PLC

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 **Roman House**

26 Suite, Apt. #, etc.

22 **296 Golders Green Road**

27 Suite, Apt. #, etc.

23 City & State

London, NW11 9PT

28 City & State

24 Zip

Country

England

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**The Prentice Hall Corporation System Inc.
1201 Hays Street
Suite 105
Tallahassee, Florida 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **Chairman and Director** ☐ DELETE

NAME **David Sinclair**

STREET ADDRESS **755 New York Avenue**

CITY-ST-ZIP **Huntington, New York 11743**

TITLE **Chief Executive Officer** ☐ DELETE

NAME **Leslie Weber**

STREET ADDRESS **755 New York Avenue**

CITY-ST-ZIP **Huntington, New York 11743**

TITLE **Director** ☐ DELETE

NAME **Malcolm Slaughter**

STREET ADDRESS **755 New York Avenue**

CITY-ST-ZIP **Huntington, New York 11743**

TITLE **Assistant Secretary** ☐ DELETE

NAME **William P. Ruffa, Jr.**

STREET ADDRESS **150 East 58th Street**

CITY-ST-ZIP **New York, New York 10155**

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME **000002210510--0**

13 STREET ADDRESS **-06/12/97--01102--002**

14 CITY-ST-ZIP ******150.00 ****150.00**

21 TITLE ☐ Change ☐ Addition

22 NAME ☐ Change ☐ Addition

23 STREET ADDRESS ☐ Change ☐ Addition

24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE ☐ Change ☐ Addition

32 NAME **000002210510--0**

33 STREET ADDRESS **-06/12/97--01102--003**

34 CITY-ST-ZIP *******23.75 *****23.75**

41 TITLE ☐ Change ☐ Addition

42 NAME ☐ Change ☐ Addition

43 STREET ADDRESS ☐ Change ☐ Addition

44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE ☐ Change ☐ Addition

52 NAME ☐ Change ☐ Addition

53 STREET ADDRESS ☐ Change ☐ Addition

54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE ☐ Change ☐ Addition

62 NAME ☐ Change ☐ Addition

63 STREET ADDRESS ☐ Change ☐ Addition

64 CITY-ST-ZIP ☐ Change ☐ Addition

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Assistant Secretary

4/29/97

(212) 353-0606

APPROVED
AND
FILED

97 JUN 10 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E034 (9/96)