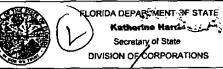
PROFIT CORPORATION

ANNUAL REPORT 1999



OCUMENT # F98000006250\

UNIONFED, INC.

FILED Jul 13, 1999 8:00 am Secretary of State

07-13-1999 90003 027 ***558.75

•	of Business	Mailing Address			-							
SMITH ST		25 SMITH ST Nanjet ny 10954										
NUET NY 10954		undrock at 10004			1	DO NOT WRITE IN THIS SPACE						
						 Date Incorporated or Qualified 11/10/1998 	i					
Principal Placs of Business		Ze. Mailing Address				4. FEI Number Applied Fo]	
		- 26						lot App		4		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	<u> </u>	Fee Required				
City & State		City & State	` `			6. Election Campaign Financing	Г.	\$5.00			-	
		Zip Cou		nto.		Trust Fund Contribution	Added to Fees			95	\dashv	
Zip Country		— — — — — — — — — — — — — — — — — — —		,,,,,		8. This corporation owes the current year Intangible Personal Property. Yes V No				1		
	9. Name and Address of Curre	29	1301			0. Name and Address of New	Registered A				1	
	g. Ivanie dio riddiese e. Carre	ALL INGROUPE - I BOILE		81 Name					.le		7	
	RACK, MARC			82 Street A		RC BUKACK C/O	UNIONA	·EV)//	VC_		-	
500 SW 33RD AVE				82 Street A		dress (P.O. Box Number is Not Acceptable)						
OCA	ALA FL 34474			83								
				84 City	61	LANDERMIE	FL	85 Zip	Code 331	2	┥	
D	to the provisions of sections 607,05	02 and 607 4508 Florida Statut	as the sh	over-parent co	moratio	w embrate this statement for the o	umose of cha	anging its r	egister	ed	1	
Affice or c	no the provisions of sections 607.05 registered agent, or both, in the Statem familiar with, and accept the obligan	a of Florida. Such change was	AUTHORIZED	d by the como	ration's	board of directors. I hereby acce	pt the appoin	tment as re	egister	ed		
GNATURE _	SRShature, typed or printed name of registered an	and and title if applicable. (N	IQTE: Registe	red Agent signature	я гедилес	when reinstating)	DATE	//		-	٦	
		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AND	DIRECT	ORS II	1 12		
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Y-ST-ZIP	NEW CITY NY 10956			TY-ST-ZIP							42	
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Æ	KARLEWICZ, MICHAEL S 45 NORMANDY VILLAGE APT 3			3.2 NAME 3.3 STREET ADDRESS				•				
EET ADORESS	NANUET NY 10954	· · · · · · · · · · · · · · · · · · ·		TY-ST-ZIP					~		- -	
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AST-ZIP E EET ADDRESS Y-ST-ZIP E EET ADDRESS (-ST-ZIP I hereby ce indicated o an officer o	entify that the information supplied wit on this annual report or supplements or director of the corporation or the r c or Block 13 if changed, or on an at	th this filing does not qualify for it annual report is true and accuracitive or trustee empowered.	4.4 CT 5.1 TH 5.2 NA 5.3 STI 5.4 CH 6.1 TH 6.2 STI 6.4 CH	TYST-ZIP TLE MME REET ADDRESS TYST-ZIP LE MME REET ADDRESS TYST-ZIP	section ture sha s require	119.07(3)(i), Florida Statutes. I fu ill have the same legal effect as if ed by Chapter 607, Florida Statut	rther certify the made under ses; and that n	Change	rmatio		Addition Addition	

IGNATURE: