

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G34414**

(4)

1. Corporation Name

UCO-IDEX CORPORATION



Principal Place of Business

**P.O. BOX 430964
SOUTH MIAMI FL 33243**

Mailing Address

**P.O. BOX 430964
SOUTH MIAMI FL 33243**

3. Date Incorporated or Qualified
03/31/1983

3a. Date of Last Report
05/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FET Number
59-2280591

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FREEMAN, PAUL H.
9100 S. DADELAND BLVD., SUITE 1406
MIAMI FL 33158**

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 or director)

12. Registered Agent signature required when possible

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PST
UGENT, AVERY**
STREET ADDRESS **881 OCEAN DR. #23A**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME **D
UGENT, AVERY**
STREET ADDRESS **881 OCEAN DR. #23A**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PST ☒ Change ☐ Addition

UGENT, AVERY
P.O. Box 430964
South Miami, FL 33243 "N/A"

D ☒ Change ☐ Addition

UGENT, AVERY
P.O. Box 430964
South Miami, FL 33243 "N/A"

☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Avery A. Ugent, President

Date

Expiry Date

04-25-96 (303) 665-3868

5-1-96

CR2E034 (12/95)