SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

H03346

UBI CORP.

FILED Aug 10, 1999 8:00 am Secretary of State

08-10-1999 90007 002 ***300.00

603222 - 90007 - 53

Principal Place of Business	Mailing Address		[(00101) 014 20100 4152 H() 01612 3H) 0161 0161 0161 0161 0161 0161 0161 016
558 MARGINAL RD. WEST PALM BEACH FL 33411	558 MARGINAL RD. WEST PALM BEACH FL 3341	1	DO NOT WRITE IN THIS SPACE
-			3. Date Incorporated or Qualified 05/14/1984
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21	26		59-2423037 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Sea.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country 25	Zip 30	Country	This corporation owes the current year Intangible Personal Property. Yes No
9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent
REVER, IRWIN S ESQ		81 Name	
1016 CLEARWATER PLACE		82 Street Ad	Idress (P.O. Box Number is Not Acceptable)
WEST PALM BEACH FL 33401		83	
		84 City	FI 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.

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Statutes I finally a satisfy that the information

14. I 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: _



1+0334 10 L63721 L003222-90007-4

U.B.J.

FOLIAGE AND LANDSCAPING NURSERY

7-30-99

558 MARGINAL ROAD WEST PALM BEACH, FLORIDA 3341

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