


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.)

1062

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H30707 (4)
1. Corporation Name
UNICOMP INTERNATIONAL, INC.

Principal Place of Business P. O. BOX 540189 MERRITT ISLAND FL 32854-0189	Mailing Address P. O. BOX 540189 MERRITT ISLAND FL 32854-0189
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FILED
97 SEP -2 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 11/20/1984		3a. Date of Last Report 03/04/1996	
4. FEI Number 59-2421389		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent TIDWELL, WAYNE J 188 LEA RIVE RD COGOGA BEACH FL 32931 P.O. Box 540189 Merritt Island, FL 32954				10. Name and Address of New Registered Agent 81 Name Tidwell, Wayne J. 82 Street Address (P.O. Box Number is Not Acceptable) 259 Quail Ln 83 Merritt Island 84 City 85 Zip Code 32953 FL			
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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 reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	TIDWELL, WAYNE J	4 TANKER TURN RD	CAPE CANAVERAL FL		Tidwell, Wayne J.	259 Quail Ln	Merritt Island FL 32953
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: 8-17-91

CR2E034 (4/97)

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UNICOMP INTERNATIONAL, INC.
P.O. Box 540189
Merritt Island, Fl 32954-0189

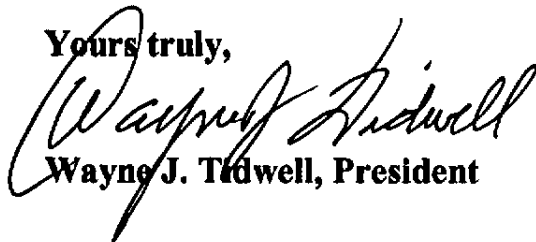
August 27, 1997

Division of Corporations
P.O.Box 6327
Tallahassee, Fl 32314

RE: Profit Corporation Annual Report 1997

This is the first notice that I received that the annual report filling fee was due. I talked to your office this morning and was told to mail the fee of \$ 165.00 to renew. Thanks for your consideration.

Yours truly,

A handwritten signature in cursive script, appearing to read "Wayne J. Tidwell".

Wayne J. Tidwell, President