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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

	1996					-		
DOCUN 1. Corporation		H65660	(3)					
•	UCT INNOVA	ITION, INC.						
Principal Place	of Business		Mailing Address			1 1021011 01101 01101 01110 01110 0		
·	GECOCK SOUARE		650 S. HEDGECOCK	SQUARE				
	BEACH FL 32937-3		SATELLITE BEACH F		27			
						3. Date Incorporated or Qualified 07/10/1985	3a. Date of Last 02/10	
2. Principal Pla	ce of Business	2	a. Mailing Address			4. FET Number		Applied For
1		26				59-2563078		Not Applicable
Suite, Apt. #	, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	75 Additional e Required
City & State		27	City & State			6. Election Campaign Financing		.00 May Be
3		28	-1			Trust Fund Contribution	1 1	ded to Fees
Zip		Country	Zip	Cou	ntry	8. This corporation has liability for		s 199.032,
4]	25	29	J	30		Florida Statutes Yes 10. Name and Address of New I	No Registered Agent	
	9. Name and A	Address of Current Reg	Istered Agent		81 Name	10, Name and Address of New I	tegistered Agent	
MEICC	KLIDT C					TO 70 70 TO THE WAY IN NOT A CONTROL		
WEISS, KURT C 1901 S. HARBOR CITY BLVD., SUITE 805					82 Street Add	ress (P.O. Box Number is Not Acceptal	не)	
MELBOURNE FL 32901				ļ	83			
	2,,,,,	•			84 City		85	Zip Code
					,	ration submits this statement for the pu	┡┖╵	
SIGNATURE _	Signature typed or printe	d name of registered agent and title OFFICERS AND DIRI		OTE Registered	Agent signature review	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIREC	
TITLE	PTSD		DELETE	5.17	TLE		Chan	ge 🔲 Addition
NAME	MOSS, JAI			1.2 N/	AME .			
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				1.3 \$1	REE1 ADDRESS			
	SATELLITE	BCH FL	E Detel	1.3 S1 1.4 Ct	TY-ST-ZIP		Chan	ne 🗀 Addition
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1 do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.0 (5)(K), Florida Statutes Furnished and does not quality for the exemption stated in Section 119.0 (5)(K), Florida Statutes Furnish 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:

James R. Mors JAMES R. MOSS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN.12,1996 407-773-3115