


4-30-97 B-5843 -C

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K70807 (8)

1. Corporation Name
UNITED DISPLAY & BOX, INC.

Principal Place of Business

16717 SCHEER BLVD.
HUDSON FL 34887

Mailing Address

16717 SCHEER BLVD.
HUDSON FL 34867-4245



3. Date Incorporated or Qualified 03/07/1989	3a. Date of Last Report 02/27/1996
4. FEI Number 22-2973677	Applied For Not Applicable
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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

BOETTCHER, BERNHARD
10120 BRIAR CIRCLE
HUDSON FL 34887

10. Name and Address of New Registered Agent

81 Name DENISE BOETTCHER
82 Street Address (P.O. Box Number is Not Acceptable)
10120 BRIAR CIRCLE
83
84 City HUDSON FL 85 Zip Code 34867

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

Denise E. Boettcher

April 23, 1997

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	HOFF, HARVEY	<input checked="" type="checkbox"/> DELETE
NAME		1568 RT. 130 NORTH	
STREET ADDRESS		NORTH BRUNSWICK NJ	
CITY-ST-ZIP			
TITLE	V	BOETTCHER, MARGARATE	<input checked="" type="checkbox"/> DELETE
NAME		10128 LANDMARK DRIVE	
STREET ADDRESS		HUDSON FL 34887	
CITY-ST-ZIP			
TITLE	S	BOETTCHER, BERNARD	<input type="checkbox"/> DELETE
NAME		10120 BRIAR CIRCLE	
STREET ADDRESS		HUDSON FL 34887	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	BERNARD BOETTCHER
3.3 STREET ADDRESS	10120 BRIAR CIRCLE
3.4 CITY-ST-ZIP	HUDSON FLA. 34867
4.1 TITLE	VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	CARMEN DEFAZIO
4.3 STREET ADDRESS	9130 PANDA LAKE
4.4 CITY-ST-ZIP	PORT RICHEY FLA. 34608
5.1 TITLE	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	DENISE BOETTCHER
5.3 STREET ADDRESS	10120 BRIAR CIRCLE
5.4 CITY-ST-ZIP	HUDSON FLA. 34867
6.1 TITLE	TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	JOHN A. DOUGHERTY
6.3 STREET ADDRESS	5363 COMMERCIAL WAY
6.4 CITY-ST-ZIP	SPRINGHILL FLA. 34606

14. I do hereby certify that the information supplied with this filing does not qualify for 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: [Signature] 4-24-97 813-811-1455

CR2E034 (9/96)