

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

FILED

Feb 05 1998 8:00am
Secretary of State

| | | |
|--|---|--|
| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # L48706 (0)
1. Corporation Name
UTO, INC.



Principal Place of Business
1372 W. 33RD ST.
RIVIERA BEACH FL 33404
US

Mailing Address
PO BOX 9591
5878 CARRIBEAN BLVD.
RIVIERA BCH FL 33419
US

DO NOT WRITE IN THIS SPACE

| | | | | | |
|--|--|---------------------|--|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | |
| 21 Suite, Apt. #, etc. | | 26 P.O. Box 9591 | | 02/09/1990 | |
| 22 City & State | | 27 Riviera Beach | | 4. FEI Number | |
| 23 Zip | | 28 FL | | 65-0175704 | |
| 24 Country | | 29 33419 | | Applied For | |
| | | 30 US | | Not Applicable | |
| 5. Certificate of Status Desired | | | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. | |
| <input type="checkbox"/> | | | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6. Election Campaign Financing Trust Fund Contribution | | | | \$8.75 Additional Fee Required | |
| <input type="checkbox"/> | | | | \$5.00 May Be Added to Fees | |

| | | | |
|---|--|---|--|
| 9. Name and Address of Current Registered Agent | | 10. Name and Address of New Registered Agent | |
| HERRING, BRUCE H 1372 W. 33RD STREET RIVIERA BEACH FL 33404 | | 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-----------------------|---|--|
| TITLE | DTSP | 1.1 TITLE | |
| NAME | HERRING, BRUCE | 1.2 NAME | |
| STREET ADDRESS | 518 AVENUE I. | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | RIVIERA BEACH FL | 1.4 CITY-ST-ZIP | |
| TITLE | DVP | 2.1 TITLE | |
| NAME | NEWBOLD, ALFONSO | 2.2 NAME | |
| STREET ADDRESS | 825 SIXTH STREET WEST | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | RIVIERA BEACH FL | 2.4 CITY-ST-ZIP | |
| TITLE | P | 3.1 TITLE | |
| NAME | HERRING, BRUCE | 3.2 NAME | |
| STREET ADDRESS | 1372 W. 33RD ST. | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | RIVIERA BEACH FL | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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:

SIGNATURE REQUIRED

Bruce Herring 2/5/98

CR2E034 (10/97)