


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAY -1 AM 10: 56

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L94000000677

UNITED ACQUISITION GROUP, L.C.
255 S ORANGE AVE
SUITE 1466
ORLANDO FL 32801

1a. Principal Place of Business Address

255 S ORANGE AVE
SUITE 1466
ORLANDO FL 32801

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/12/1994	FL
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Country		59-3283228	
				5. Date of Last Report	6. Certificate of Status Desired
				03/03/1997	\$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office	
GASDICK, MICHAEL J 255 S ORANGE AVE SUITE 1466 ORLANDO FL 32801		Name Street Address (P.O. Box Number is Not Acceptable) 900002511949--7 Suite, Apt. #, etc. --05/05/98--01131--017 ****188.75 ****188.75 City FL Zip Code MAH	

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	LONG, DOUGLAS F	1500 LEE RD SUITE 200	ORLANDO FL
MEM	LONG, BRENDA	1500 LEE RD SUITE 200	ORLANDO FL
MEM	MASI, RICH	3601 VINELAND RD SUITE 13	ORLANDO FL
MEM	MASI, RITA	3601 VINELAND RD SUITE 13	ORLANDO FL

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:  4/29/98
SIGNATURE AND TYPE (OR PRINTED NAME) OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #