

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90211 026 ***150.00

DOCUMENT # M99164

1. Corporation Name

UNITED ENTERPRISES OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

7152 SW 4TH ST
MIAMI FL 33155
US

Mailing Address

7152 SW 47 ST
MIAMI FL 33155
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/14/1988

4. FEI Number

65-0075545

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

9. Name and Address of Current Registered Agent

BEHRENFELD, CRAIG E
601 BAYHORE BLVD SUITE 700
SUITE 700
TAMPA FL 33606

10. Name and Address of New Registered Agent

81 Name

Bruce H. Bokor

82 Street Address (P.O. Box Number is Not Acceptable)

911 Chestnut Street

83

84 City

Clearwater

FL

85 Zip Code
33756

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/8/99

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME COUNTY, CALVERT
STREET ADDRESS 4900 MANATEE AV W
CITY-ST-ZIP BRADENTON FL 34209

TITLE Director/President ☐ DELETE
NAME James R. Harper
STREET ADDRESS 311 Park Place Blvd.
CITY-ST-ZIP Suite 400, Clearwater, FL 33759

TITLE Secretary ☐ DELETE
NAME Bruce H. Bokor
STREET ADDRESS 911 Chestnut Street
CITY-ST-ZIP Clearwater, FL 33756

TITLE Treasurer ☐ DELETE
NAME Carlos Delgado
STREET ADDRESS 7152 SW 47th St; Miami, FL 33155
CITY-ST-ZIP 33155

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/13/99

(727) 461-1818

CR2E034 (11/98)