


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**


FILED
Mar 17, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000049349 1. Entity Name UNIPOWER CORPORATION	
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Principal Place of Business 3900 CORAL RIDGE DR. CORAL SPRINGS, FL 33065	Mailing Address 3900 CORAL RIDGE DR. CORAL SPRINGS, FL 33065
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD, #221E PALM BEACH GARDENS, FL 33410
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01062004 No Chg-P CR2E034 (10/03)	
4. FEI Number 65-0080704	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <u><i>Brian J. Pucci</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE <u><i>1/6/04</i></u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000090493 03/17/04-80021-018 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD PALMER, CHARLES 312 S.E. 17TH STREET, STE. 300 FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MERINO, JOSE 3900 CORAL RIDGE DR. CORAL SPRINGS, FL 33065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FLEITES, RAYMOND 312 S.E. 17TH STREET, STE. 300 FT. LAUDERDALE, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERGONIA, R. DAVID 125 S. LASALLE STREET, STE. 4000 CHICAGO, IL 60603
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D UNDERWOOD, ROBERT 125 S. LASALLE STREET, STE. 4000 CHICAGO, IL 60603
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHNEIDER, EDWARD 3900 CORAL RIDGE DR. CORAL SPRINGS, FL 33065

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <u><i>Brian J. Pucci</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <u><i>1/22/04</i></u> <small>Daytime Phone #</small>