

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

677759
FILED

Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # P00000049349	
1. Entity Name UNIPOWER CORPORATION	

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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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/07)

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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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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.

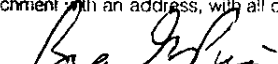
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! - FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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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 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MERINO, JOSE 3900 CORAL RIDGE DR. CORAL SPRINGS FL 33065 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FLEITES, RAYMOND 312 S.E. 17TH STREET, STE. 300 FT. LAUDERDALE FL 33016 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERGONIA, R. DAVID 125 S. LASALLE STREET, STE. 4000 CHICAGO IL 60603 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D UNDERWOOD, ROBERT 125 S. LASALLE STREET, STE. 4000 CHICAGO IL 60603 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHNEIDER, EDWARD 3900 CORAL RIDGE DR. CORAL SPRINGS FL 33065 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 000000848291 03/18/08-80023-002 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:  **2/21/08 9543462412**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-Month-Year