## 2002 UNIFORM BUSINESS REPORT (UBR)

## Aug 04, 2002 8:00 am Secretary of State DOCUMENT # P00000074524 08-04-2002 90166 028 \*\*\*150.00 UNICATORPORATION Principal Place of Business Mailing Address 255 GALEN DRIVE SUITE #4C 255 GALEN DRIVE SUITE #4C 8360 W Hogler St \$203 Wien; -R. 33144 KEY BISCAYNE FL 33149 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1059516 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MALEK, FARHAD Street Address (P.O. Box Number is Not Acceptable) 2333 BRICKELL AVENUE **MEZZANINE SUITE MIAMI FL 33129** City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 110 · 13-13 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD Delete ☐ Change ☐ Addition NAME MENDEZ, GISELA NAME 4666 S.W. 12TH COURT STREET ADDRESS STREET ADDRESS **DEERFIELD BEACH FL 33442** CITY-ST-ZIF CITY-ST-ZIP TITI F HINCAPIE GloriA TITLE Addition NAME 255 GAREN Dr. \$4C NAME STREET ADDRESS STREET ADDRESS Ken Biscoyne - R. 93149 CITY-ST-7IP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITI F ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition ☐ Change

13. 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 11 or Block 12 if changed, or on an attachment will an address with all other key empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

Daytime Phone #

achment #P00000074524 972323

8360 West Flagler St. #203 Miami, Fl. 33144

July 30, 2002

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL. 32314

## Gentlemen:

We are enclosing 2002 annual report for Unica Corp., document #P00000074524 and check for \$150 to cover the annual fee.

We did not receive the UBR form for 2002 and that is why we did not send it with the applicable fee. I guess that maybe it was sent to the registered agent's office and he did not give it to us.

Please send all future correspondence to 8360 West Flagler ST. #203, Miami, Fl. 33144.

Very truly yours,

Angel Velasco

President