

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000095121

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

Entity Name: UNIPOW ENTERPRISES, INC.

**Current Principal Place of Business:**

4378 PARK BLVD  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

4378 PARK BLVD  
PINELLAS PARK, FL 33781

**New Mailing Address:**

FEI Number: 59-3673919

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GAWRON, MARY  
19321-C US HWY 19 N, STE. 601  
CLEARWATER, FL 33764 US

**Name and Address of New Registered Agent:**

GAWRON, MARY  
4378 PARK BLVD  
PINELLAS PARK, FL 33781

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.

SIGNATURE: MARY GAWRON

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PRAUSE, TOMAS  
Address: 828 E STEWART STREET  
City-St-Zip: DAYTON, OH 45410

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOMAS PRAUSE

P

04/30/2002

Electronic Signature of Signing Officer or Director

Date