2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# P02000018757

Entity Name: UNITED CONCEPTS, INC.

Current Principal Place of Business:

531 NW 193RD AVE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

1171 N. INDIANAPOLIS AVENUE
HERNANDO, FL 34442

Current Mailing Address:

531 NW 193RD AVE
PEMBROKE PINES, FL 33029

New Mailing Address:

1171 N. INDIANAPOLIS AVENUE
HERNANDO, FL 34442

FEI Number: 01-0606706 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCIOLINO, FRANK
531 NW 193RD AVE
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

SCIOLINO, FRANK
1171 N. INDIANAPOLIS AVENUE
HERNANDO, FL 34442 US

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: 05/01/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SCIOLINO, FRANK
Address: 531 NW 193RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D ( ) Delete
Name: SCIOLINO, LOUISE
Address: 531 NW 193RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SCIOLINO, FRANK
Address: 1171 N INDIANAPOLIS AVENUE
City-St-Zip: HERNANDO, FL 34442

Title: D (X) Change ( ) Addition
Name: SCIOLINO, LOUISE
Address: 1171 N INDIANAPOLIS AVENUE
City-St-Zip: HERNANDO, FL 34442

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: FRANK SCIOLINO PRES 05/01/2007
Electronic Signature of Signing Officer or Director Date