

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2003 8:00 am**  
**Secretary of State**

04-30-2003 90095 020 \*\*\*150.00

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**DOCUMENT # P02000063993**

1. Entity Name  
UEC, INC.



Principal Place of Business  
7120 LAKE ELLENOR DRIVE  
ORLANDO FL 32809-5721

Mailing Address  
POST OFFICE BOX 55  
ORLANDO FL 32802-0055



2. Principal Place of Business  
10600 Orange Ave.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Orlando, FL

City & State

4. FEI Number

01-0713193

Applied For  
Not Applicable

Zip  
32824

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NAGEL, DONALD G  
7120 LAKE ELLENOR DRIVE  
ORLANDO FL 32809-5721

Name  
E. Jay Strates

Street Address (P.O. Box Number is Not Acceptable)  
10600 Orange Ave.

City  
Orlando

FL

Zip Code  
32824

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 E. Jay Strates, Pres.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/24/03

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME E. JAY STRATES,  
STREET ADDRESS 7120 LAKE ELLENOR DRIVE  
CITY-ST-ZIP ORLANDO FL 32809-5721

TITLE DP ☒ Change ☐ Addition  
NAME E. Jay Strates  
STREET ADDRESS 10600 Orange Ave.  
CITY-ST-ZIP Orlando, FL 32824

TITLE D ☐ Delete  
NAME MAGID, SUSAN S  
STREET ADDRESS 7120 LAKE ELLENOR DRIVE  
CITY-ST-ZIP ORLANDO FL 32809-5721

TITLE DV ☒ Change ☐ Addition  
NAME Magid, Susan S.  
STREET ADDRESS 10600 Orange Ave.  
CITY-ST-ZIP Orlando, FL 32824

TITLE D ☐ Delete  
NAME DOREMUS, SIBYL S  
STREET ADDRESS 7120 LAKE ELLENOR DRIVE  
CITY-ST-ZIP ORLANDO FL 32809-5721

TITLE DST ☒ Change ☐ Addition  
NAME Doremus, Sibyl S.  
STREET ADDRESS 10600 Orange Ave.  
CITY-ST-ZIP Orlando, FL 32824

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*E. Jay Strates* E. Jay Strates, Pres.

04/24/03

(407) 855-3939

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)