2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0300008432 1. Entity Name UVIUM, INC.			FILED 04 MAR -2 M II: 00
Principal Place of Business	Mailing Address		SECRETARY OF STATE TALLAHASSEE, FLORID
100 NORTH BISCAYNE BLVD., STE. 1207 MIAMI, FL 33132	100 NORTH BISCAYNE E Miami, FL 33132	BLVD., STE. 1207	FALLAHASSEE, FLORD
2. Principal Plage of Business 4000 YONCE de Leon	3. Mailing Address	ce de leun E	
Suite, Apt, #, etc.	Suite. Apt. #, etc.		02072004 Chg-P CR2E034 (10/03)
Coral faldes, FL	City & State Ga	Hos,FL	4. FE! Number Applied For Not Applicable
33146 Country A	337146	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent Name SCHAECHTER, FRED R			7. Name and Address of New Registered Agent Volume I Jacques
100 NORTH BISCAYNE BLVD., STE. 1 MIAMI, FL 33132	207	Street Addre	ss (P.O. Box Number is Not Acceptable)
		City	al fallor to FL Zig Coff 4
The above named entity submits this statement the obligations of registered agent.	for the purpose of changing its r	registered office or reg	istered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE VALLE	1 Pee si	dent	2/26/04
Signature Typed or printed name of registered age		Registered Agent signature rec	tured when (dinstating) DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550	9. Election Campaig Trust Fund Contri	· · ·	\$5.00 May Be Added to Fees
· · · · · · · · · · · · · · · · · · ·	D DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME SCHAECHTER, FRED R	Delete	TITLE NAME	Change Addition
STREET ADDRESS 100 NORTH BISCAYNE BLVD. GIY-ST-ZIP MIAMI, FL 33132	, STE. 1207	STREET ADDRESS CITY-ST-ZIP	
TITLE PST D	☐ Delete	ture	Change Addition
NAME JACQUES, VALESKA I STREET ADDRESS 8224 SW 157 CT.		NAME STREET ADDRESS	200029828562 03/03/0401036025 ***80.00
CITY-SI-ZIP MIAMI, FL 33193		CITY-ST-ZIP	0.00.007 -01000 -020 ***00.00
MILE NAME	Defete	TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY- ST-ZIP		CITY-S1-ZIP	
TITLE NAME	☐ Delete	TITLC NAME	Change Addition
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
TITLE	☐ Delete	CITY-ST-ZIP	201102982 85 66 2 4tilita
NAME	0000	NAME	200029828552Addition 02/03/0401036007 **70.00
STREET ADDRESS CITY-SI-ZIP		STREET ADDRESS CITY+ST+ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME Street address		NAME STREET ADDRESS	· ·
CITY-ST-ZIP		CITY-ST-ZIP	T. Lewis 3/3/c+
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 at other like empowered.			
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Dayling Pront #			
1 Valve Dayling Prong (