

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000094871

**FILED**  
**Dec 21, 2007**  
**Secretary of State**

**Entity Name:** UEP, INC.

**Current Principal Place of Business:**

10794 FLORENCE AVE  
THONOTOSASSA, FL 33592

**New Principal Place of Business:**

185 DRENNEN ROAD  
307  
ORLANDO, FL 32806

**Current Mailing Address:**

10794 FLORENCE AVE  
THONOTOSASSA, FL 33592

**New Mailing Address:**

185 DRENNEN ROAD  
307  
ORLANDO, FL 32806

**FEI Number:** 20-1274866

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BERKSON, GARY M  
111 N ORANGE AVE  
SUITE 1200  
ORLANDO, FL 32801 US

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

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: JAMES DUNN

\_\_\_\_\_  
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: DUNN, HARRY P  
Address: 10794 FLORENCE AVE  
City-St-Zip: THONOTOSASSA, FL 33592

Title: D ( ) Delete  
Name: DUNN, BONNIE L  
Address: 10794 FLORENCE AVE  
City-St-Zip: THONOTOSASSA, FL 33592

Title: D ( ) Delete  
Name: DUNN, COLIN  
Address: 10794 FLORENCE AVE  
City-St-Zip: THONOTOSASSA, FL 33592

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

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

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

Title: D (X) Change ( ) Addition  
Name: DUNN, COLIN  
Address: 7814 PINEAPPLE DRIVE  
City-St-Zip: ORLANDO, FL 32835

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: COLIN DUNN

CEO

12/21/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date