2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151813

Entity Name: UNIPRIME, INC.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 532057 P.O. BOX 411

ORLANDO, FL 32853 US TAMPA, FL 33602 US

Current Mailing Address: New Mailing Address:

P.O. BOX 532057 P.O. BOX 411

ORLANDO, FL 32853 US TAMPA, FL 33602 US

FEI Number: 36-4563395 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WILLIAMS, PATRICIA A

1226 MOUNT VERNON STREET

ORLANDO EL 20002 LIS

ORLANDO, FL 32803 US #2406 TAMPA, FL 33602 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: PATRICIA A WILLIAMS 04/30/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution (X).

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

Title: PST () Delete Title: PST (X) Change () Addition

Name: WILLIAMS, PATRICIA A Name: WILLIAMS, PATRICIA A

Address: 1226 MOUNT VERNON STREET Address: 1000 S HARBOUR ISLAND BLVD. #2406

City-St-Zip: ORLANDO, FL 32803 US City-St-Zip: TAMPA, FL 33602 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA A WILLIAMS PST 04/30/2006