## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000059053

Entity Name: UNICORP IMPORT EXPORT INC.

FILED Apr 24, 2006 Secretary of State

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

1990 SW 81 AVE - STE 201 3731 NW 95 TERR N LAUDERDALE, FL 33068 1603

SUNRISE, FL 33351 US

**Current Mailing Address:** New Mailing Address:

1990 SW 81 AVE - STE 201 1457 SW ORIOLE LN

N LAUDERDALE, FL 33068 PORT ST LUCIE, FL 34953

FEI Number: 38-3720537 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BROWN, ALBERT B BROWN, ALBERT B 1990 SW 81 AVE - STE 201 1457 SW ORIOLE LN

N LAUDERDALE, FL 33068 US PORT ST LUCIE, FL 34953 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: ALBERT BROWN 04/24/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete Title: (X) Change ( ) Addition BROWN, ALBERT BROWN, ALBERT B Name: 1457 SW ORIOLE LN Address:

1990 SW 81 AVE - STE 201 City-St-Zip: N LAUDERDALE, FL 33068 City-St-Zip: PORT ST LUCIE, FL 34953 US

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

Name: BROWN, NORMA Name: BROWN, NORMA 1990 SW 81 AVE - STE 201 Address: 1457 SW ORIOLE LN Address: N LAUDERDALE, FL 33068 PORT ST LUCIE, FL 34953 City-St-Zip: City-St-Zip:

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: ALBERT BROWN PD 04/24/2006