

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000081778

FILED
May 01, 2007
Secretary of State

Entity Name: UNITED NETWORK INSTITUTE ENTERPRISES CORP.

Current Principal Place of Business:

540 19TH STREET NW
NAPLES, FL 34120

New Principal Place of Business:

602 S. MAIN STREET
#493
CRESTVIEW, FL 32536

Current Mailing Address:

540 19TH STREET NW
NAPLES, FL 34120

New Mailing Address:

602 S. MAIN STREET
#493
CRESTVIEW, FL 32536

FEI Number: 51-0588674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSGROVE, JEFF
540 19TH STREET NW
NAPLES, FL 34120 US

Name and Address of New Registered Agent:

COSGROVE, JEFF
602 S. MAIN STREET
#493
CRESTVIEW, FL 32536 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:

05/01/2007

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: P () Delete
Name: COSGROVE, JEFF
Address: 9531 INDIAN RESERVE ROAD
City-St-Zip: ALPENA, MI 49707

Title: VP () Delete
Name: COSGROVE, MICHELLE
Address: 9531 INDIAN RESERVE ROAD
City-St-Zip: ALPENA, MI 49707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COSGROVE, JEFF
Address: 602 S. MAIN ST #493
City-St-Zip: CRESTVIEW, FL 32536

Title: VP (X) Change () Addition
Name: COSGROVE, MICHELLE
Address: 602 S. MAIN STREET #493
City-St-Zip: CRESTVIEW, FL 32536

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: MICHELLE COSGROVE

VP

05/01/2007

Electronic Signature of Signing Officer or Director

Date