FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

DOCUMENT # P17321

UNITED ADVERTISING PUBLICATIONS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

Secretary of State

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90093 045 ***150.00



15400 KNOLL TRAIL SUITE 400 DALLAS TX 75248		15400 KNOLL TRAIL SUITE 400 DALLAS TX 75248			DO NOT WRITE IN TH	IIS SPACE		
					3. Date Incorporated or Qualifed 12/21/1987	1		
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	TA	pplied For	
		26			91-1189732		lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_		Additional	
2		27			5. Certifcate of Status Desired	5. Certificate of Status Desired Fee Required		
City & State		City & State	City & State		6: Election Campaign Financing Trust Fund Contribution			
Zip	Country Zip Cou		Country					
4	25 29 30			Personal Property Tax. Yes No				
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
	ADDODATION OVOTEN		81	Name				
	ORPORATION SYSTEM S. PINE ISLAND ROAD		82	Street	Address (P.O. Box Number is Not Acceptable)			
PLAN	ITATION FL 33324		83					
			84	City	· · · · · · · · · · · · · · · · · · ·	L 85 Zip	Code	
				L	-		rogistored	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE								
				nt signature i	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12	
12.	0.1.102.10.11.10		1.1 TITLE		TODAY TOTAL OF THE PARTY OF THE	Change		
TITLE	PCD PONAL DECAL ALICE! A	C 2222.0	1.2 NAME			_ ,	_	
NAME	DOTALDOOM, MOZE 71.						1	
STREET ADDRESS	10100 INICE INE # 100		1.3 STREET ADDRESS					
CITY-ST-ZIP			1.4 CITY-S 2.1 TITLE	IT-ZIP		Change	Addition	
TITLE	TID							
NAME	CEI / GEI WII EI		2.2 NAME					
STREET ADDRESS			2.3 STREE	TADDRESS			.	
CITY-ST-ZIP	DALLAS TX 75248		2. 4 CITY-ST-ZIP				Addition	
TITLE	_		3.1 TITLE			Change	. [_] Addition	
NAME	GOLOT, TOTALLY O.		3.2 NAME				Ì	
STREET ADDRESS			3.3 STREE	T ADDRESS	•			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE	VD □ DELETE 4.1 T		4.1 TITLE			Change	Addition	
NAME	MARTIN, ERNIE J.		4.2 NAME					
STREET ADDRESS	10 100 1010 12 1100 1100		4.3 STREE	TADDRESS	3			
CiTY-ST-ZiP	DALLAS TX		4.4 CITY-5	T-ZIP				
TITLE	VD	■ · ·			1	Change	Addition	
NAME	BAUDO, JEFFREY J		5.2 NAME					
STREET ADDRESS	15400 KNOLL TRL #400			T ADDRESS			ļ	
CITY-ST-ZIP	DALLAS TX		5.4 CITY-8	T-ZIP				
TITLE	VD	₩ DELETE	6.1 TITLE		VD	Change	Addition	
NAME	LEVINE, FRED J				DWAIN CAPODICE		ļ	
STREET ADDRESS	15400 KNOLL TRAIL 400		6.3 STREE	TADORESS			1	
CITY-ST-ZIP	DALLAS TX		6.4 CITY-5	T-ZIP	Dayas TX 752-48			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Date