## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (2)P23595 UHI, INC. Principal Place of Business Mailing Address 105 W MICHIGAN ST. ATTN: LEGAL DEPARTMENT 105 W MICHIGAN ST. ATTN: LEGAL DEPARTMENT MILWAUKEE WI 53203 MILWAUKEE WI 53203 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/27/1989 2. Principal Place of Business 2a. Maiting Address 4. FEI Number Applied For 98-0066268 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes **⊠** No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** City Zip Code 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 reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD DELETE TITLE 1.1 TITLE PRESTOENT Change Addition SMITH, GUY W. J. WESLEY CARTER 1.2 NAME NAME 105 W. MICHIGAN ST. 105 W. MECHIGANST. 1.3 STREET ADDRESS STREET ADDRESS MILWAUKEE WI 1.4 CITY-ST-ZIP MILWAUKEE, WE. 53203 CITY-ST-ZIP DELETE Addition TITLE 21 TITLE austin, leland M. Jr. NAME 2.2 NAME 105 W. MICHIGAN ST. STREET ADDRESS 2.3 STREET ADDRESS MILWAUKEE WI CITY-ST-ZIP 2 4 CITY-ST-7IP DELETE Change Addition TITLE 3.1 TITLE RHINELANDER, MELVIN A. NAME 3.2 NAME 2200 YONGE ST.. STREET ADDRESS 3.3 STREET ADDRESS TORONTO ONT. CAN. CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition TITLE 4.1 TITLE DINAUER, THOMAS A. NAME 4. 2 NAME 105 W. MICHIGAN ST. STREET ADDRESS 4.3 STREET ADDRESS MILWAUKEE WI CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE CARTER, ROCH NAME 5.2 NAME 105 W. MICHIGAN ST. STREET ADDRESS 5.3 STREET ADDRESS **MILWAUKEE WI** CITY-ST-ZIP 5.4 CITY - ST - ZIP VICE PRESIDEM DELETE Z Change ■ Addition ABRAMOWSKI, ROBERT J. WALTER A.LEVONOWICH 105 W. MICHIGAN ST. 105 W.MICHTGAN ST. STREET ADDRESS 6.3 STREET ADDRESS 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(\$)(i), Florida Statutes. I further certify that the information indicated on this annual report is 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 exprowered 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.

SIGNATURE:

1 Itua

V.P.

4-24-98

414-347-4404