2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 16, 2004 8:00 am Secretary of State

DOCUMENT # P93000012967 1. Entity Name UNITED PURCHASING AFFILIATES, INC.							03-29-20	004 90531		
Principal Plac	e of Business	Mailing Address	Mailing Address							
1101 CORNWALL RD		1101 CORNWALL RD			ĺ	66412241				
SANFORD F	FL 32273	SANFORD FL 32273								
							1 JEWEN (II 1800 FM CT	H TER OUR DOOR F		1111 A T (TA
2. Principal F	Place of Business	3. Mailing Address				1				
Suite, Apt. #, etc.		Suite, Apt. #, etc.								
05.0,740.	, W, WIO.	30.0, 192.1,00.			İ		MOORE	CH2E03	34 (11/03)	
City & Star	te	City & State				4. FE	59-3166	5544		Applied For
Zip Country		Zip Count		try					\$8.75 A	Not Applicable
						5. Certificate of Status Desired Fee R		Fee Requir	ed adultional	
	6. Name and Address of Curre	nt Registered Agent				7. N	ame and Address of N	ew Registere	d Agent	
Name Name										
CORP, WILLIAM T SR 1101 CORNWALL RD Street Address						P.O. Bo	x Number is Not Accep	otable)	=	
SAN		 -			 _					
1.										
•				City				F	- 1	
8. The above	named entity submits this statement	tor the purpose of changing its	register	ed office or r	register	ed age	nt, or both, in the State	of Florida. I a	m familiar with	h, and accept
the obligations of existencia agent.										
SIGNATURE Signature, typed or puryled rigare of registered agent and tilled approaches. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! PPE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State						Election Campaig Trust Fund Contri	ibution.	LJ Adde	00 May Be ed to Fees	
10.	OFFICERS AN	ID DIRECTORS	11.		·	ADE	DITIONS/CHANGES TO	OFFICERS A		
TITLE	CORP, WILLIAM SR.	C Delete	TITU	- 1					☐ Change	Addition
STREET ADORESS	1101 CORNWALL RD.		3	STREET ADDRESS						
CITY-ST-ZIP	SANFORD FL 32773		СПА	-ST-ZIP				<u>.</u>		
TITLE	V	☐ Detete	TITL						☐ Chánge	Addition
NAME STREET ADDRESS	CORP, WILLIAM JR. 1101 CORNWARE RD.	CORP, WILLIAM JR.		E ADORESS						
CITY-ST-ZIP	SANFORD FL 32773			-ST-ZIP						
TITLE	v	☐ Delete	III.	E					Change	Addition
NAME	CORP, DOUGLAS M		N/AB/	1						
STREET ADDRESS CITY-ST-ZIP			1	EET ADDRESS -St-Zip						
TITLE	SANFORD FL 32773	☐ Delete	TITL						Change	Addition
NAME	CORP, SHIRLEY F	C PERSE	NAM						orange	
STREET ADDRESS			STR	EET ADDRESS						
CITY-ST-ZIP	SANFORD FL-32773		CITY	-ST-ZIP						
TITLE		☐ Delete	TITE	1					☐ Change	Addition
NAME STREET ADDRESS	,		NAM STR	EET ADORESS						
CITY-ST-ZIP				-ST-ZIP						
TILE	<u> </u>	☐ Delete	TITL	Ε					☐ Change	Addition
NAME		•	NAM	1					•	
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS						
	12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated indicated on this report or supplied with this filling does not qualify for the exemption stated indicated on this report or supplemental report is true and accurate and that re-circular about here.						10.07/3VI) Davida 0	uton I frushara	continuence	information
16. Incredy	certify that the implinishout pubblied /	with this mind does not drain to	a tue exe	ATHURUT STATE	ag ii) 26	ะตมบท 7	19.07(3)(1), FIDRIDA STAT	ules. Hunner (seriny mai ine	HIDHINGH

urare and that my signature shall have the same legal effect as if made under oath; that I am an officer or director 200 this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if se empowered. of the corporation or the receichanged, or on an attachmen

SIGNATURE: 3