

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000038217 (4)

1. Corporation Name

UNIDATA, INC.



Principal Place of Business

Mailing Address

3275 PROGRESS DRIVE
SUITE B
ORLANDO FL 32826

3275 PROGRESS DRIVE
SUITE B
ORLANDO FL 32826

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/27/1993

3a. Date of Last Report

05/10/1995

4. FEI Number

59-3184647

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 must be typed.

(If the registered agent signature is required, when the State is

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
CP
HUANG, CHENG-HAO
STREET ADDRESS
8843 LARWIN LANE
CITY-STATE-ZIP
ORLANDO FL 32817

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
D
LIANG, CHU-KWO
STREET ADDRESS
23-37 143RD STREET
CITY-STATE-ZIP
WHITESTONE NY 11357

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
T
CHOW, CHING
STREET ADDRESS
8843 LARWIN LANE
CITY-STATE-ZIP
ORLANDO FL 32826

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
S
BELL, TAMARA A
STREET ADDRESS
3016 SARATOGA DRIVE
CITY-STATE-ZIP
ORLANDO FL 32826

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96 (407)382-2735
Date: Daytime Phone:

CR2E034 (12/95)