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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P93000071597 (7)

U-O, INC.

Principal Place of Business Mailing Address 2000 NW 92ND AVE 2000 NW 92ND AVE MIAMI FL 33172 **MIAMI FL 33172** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u> 10/15/1993</u> 2. Principal Place of Business 2a. Mailing Address Applied For 65-0447525 26 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 🔀 Yes 25 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ortega, jose a. 2000 N.W. 92 AVE. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33172 83 Zip Code 84 City 65 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE NAME ORTEGA, JOSE A SR 1.2 NAME 2000 NW 92ND AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE DST 2.1 TITLE UNANUE, FRANCISCO J NAME 2.2 NAME STREET ADDRESS 2000 NW 92ND AVE -2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE UNANUE, JOSEPH A 3.2 NAME NAME

6.4 City-St-ZIP

14. I hereby certify that the information supplied with this filing foces not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing foces not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied until this filing foces not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied until this filing foces not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplied until this filing foces not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an officer or director of the conformation or the receiver of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an officer or director of the conformation or the receiver of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an officer or director of the conformation or the receiver of the conformation of the receiver of the receiver of the conformation of the receiver of the conformation of the receiver of the receiv

3.3 STREET ADDRESS

3.4. CITY - ST - ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY+ST-ZIP

6.3 STREET ADDRESS

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

DELETE

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY - ST - ZIP

TITLE

NAME

NAME

TITLE

2000 NW 92ND AVE

MIAMI FL

JOSE A. ORTEGA, PRESIDENT

FEB.-23-1998

FILED

Feb 27 1998 8:00am

Secretary of State

305/591-2991

Change

Change

Change

Addition

Addition

Addition