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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not question indicated on this annual report or supplemental annual report is rue at officer or director of the corporation or the receiver or trusted environmental block 12 or Block 13 if changed, or on an attachment with an address.

DOCUMENT # P9400001668 (0)

UNION INVESTORS GROUP, INC.

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

P94000001668 (0)

Apr 10 1998 8:00am
Secretary of State

FILED

Principal Place of Business Mailing Address				***************************************	L AMDITERA (EN ANGIA MANTE MOTIL ONITE MATIL NOTAL	18181 11818 B1118 B1194 1811 1881
		P.O. BOX 652251 MIAMI FL 33265-2251				
					DO NOT WRITE IN THI	S SPACE
ĺ					3. Date Incorporated or Qualified	
2 Principal F	Place of Business	2a. Mailing Address			01/07/1994 4. FEI Number	
 		26. Mailing Address	٦ - "		65-0464233	Applied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27	¬		5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes or has paid the c	
24	25	29	30		Personal Property Tax due June 30.	X Yes 🗌 No
	9. Name and Address of Curr	ent Registered Agent		2.71	10. Name and Address of New Registered	d Agent
FUMERO, ARMANDO				81 Name		
7634 SW 146TH CT			<u> </u>	82 Street A	ddress (P.O. Box Number is Not Acceptable)	
MI	AMI FL 33183					
				B3		
			ľ	B4 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the ab	ove-named c		of changing its registered
office or r agent. I a	registered agent, or both, in the Sta im f am lliar with, and accept the obli	le of Florida. Such change was a gations of, Section 607.0505, Flo	authorized orida Statu	by the corpo ites.	orporation submits this statement for the purpose viation's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	Signature, typed or printed name of registered a				quired when reinstating) DATE	
12.		ND DIRECTORS	13.	Agon bignotare re	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	PSTD	DELETE 1.1		.E		Change Addition
NAME	Fumero, armando		1.2 NAI	AE		
STREET ADDRESS	P.O. BOX 652251 N/A		1.3 ST	EET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33265-2251		1.4 CIT	r-ST-ZIP		
TITLE		DELETE	2.1 TIT	E		Change Addition
NAME			2.2 NAI	AE .		
STREET ADDRESS			2.3 STF	EET ADDRESS		
CITY-ST-ZIP			2. 4 Ci	Y-ST-ZIP		
TITLE	DELETE 3.1 T		3.1 111	E		Change Addition
NAME			3.2 NAF	ME		
STREET ADDRESS			3.3 STP	EET ADDRESS		
CITY-ST-ZIP		T per era		Y-ST-ZIP		
TITLE		☐ DELETE	4.1 7∤1)			Change Addition
NAME	•		4. 2 NA			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		DELETE		7-ST-2IP		Observe Laters
TITLE		Lad Othtile	5.1 TITL			☐ Change ☐ Addition
NAME OXPOSEZ ADDRESS			5.2 NAM			
STREET ADDRESS				EET ADDRESS	-	
CITY-ST-ZIP TITLE		DELETE	_	'-ST-ZIP		Change 4 ddir
HILE		III DETELL	61 TIT	t [Change Addition

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information turate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in