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

Mailing Address

% PEPPER, 1515 UNIVERSITY DR., #114

PROFIT CORPORATION ANNUAL REPORT

1997

% PEPPER, 1515 UNIVERSITY DR., #114

Principal Place of Business



FLORIDA DEPARAMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 09 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400040151 (0)

Acres 1 Frank

UNUFY FINANCIAL SERVICES, INC.

CORLA SPRINGS FL 33071 CORLA SPRINGS FL 33071 3. Date Incorporated or Qualified 3a. Date of Last Report 05/27/1994 05/01/1996 Principal Place of Business Mailing Address 4, FEI Number Applied For 21 26 65-0495221 Not Applicable Sulte, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes Yes 25 30 Florida Statutes ☐ No 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KRESH, LEONARD % PEPPER, 1515 UNIVERSITY DR., #114 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL SPRINGS FL 33071** 83 84 City 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 re-instating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DELETE Change Addition TITLE 1.1 TIBLE KRESH, LEONARD NAME 1.2 NAME % PEPPER, 1515 UNIVERSITY DR., #114 STREET ADDRESS 1.9 STREET ADDRESS **CORAL SPRINGS FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 THUE NAME 2 P NAME STREET ADDRESS 28 STREET ADDRESS 2 4 CHY-S1-ZIP CITY-ST-ZIP DELFTE ☐ Change Addition TITLE 31 TITLE NAME 32 NAME STREET ADDRESS **33 STREET ADDRESS** CITY-ST-ZIP 34. CITY-ST-ZIF DELETE Change Addition TITLE 4.5 THLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE ☐ Change Addition 51 THLE NAME 52 NAME STREET ADDRESS **5.8 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 69 STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.