

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

FILED
May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000041315

1. Corporation Name

Unification Concept Investment, Inc.

Principal Place of Business
 3111 University Drive
 Suite 725-6
 Coral Springs, Florida 33065

Mailing Address

SAME

3. Date Incorporated or Qualified 6/2/94
 3a. Date of Last Report 2/7/96

2. Principal Place of Business
 21 3011 N.E. 57th Court
 Suite, Apt. #, etc.

2a. Mailing Address
 26 3011 N.E. 57th Court
 Suite, Apt. #, etc.

4. FEI Number 59-7038889
 Applied For Not Applicable

22 City & State
 23 Fort Lauderdale, Fl.

27 City & State
 20 Fort Lauderdale, Fl.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip 33308
 25 Country USA

29 Zip 33308
 30 Country USA

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

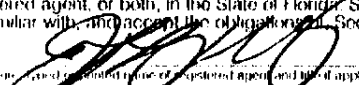
9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Egon L. Lacher
 3111 University Drive
 Suite 725-6
 Coral Springs, Florida 33065

81 Name Jeffrey W. Frantz
 82 Street Address (P.O. Box Number Is Not Acceptable) 11900 Biscayne Boulevard
 83 Suite 408
 84 City North Miami FL 85 Zip Code 33181

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE:  Jeffrey W. Frantz (NOTE: Registered Agent signature required when registering) DATE: 4/11/97

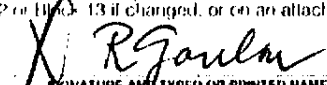
12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	Rene Goulon	
STREET ADDRESS	3111 University Drive #725-6	
CITY-ST-ZIP	Coral Springs, Fl. 33065	
TITLE	D	☐ DELETE
NAME	Elard R. Schmidt	
STREET ADDRESS	3111 University Drive #725-6	
CITY-ST-ZIP	Fort Lauderdale, Fl. 33065	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/T/D	☒ Change ☐ Addition
1.2 NAME	Rene Goulon	
1.3 STREET ADDRESS	3011 N.E. 57th Court	
1.4 CITY-ST-ZIP	Fort Lauderdale, Fl. 33308	
2.1 TITLE	D/S	☒ Change ☐ Addition
2.2 NAME	Elard R. Schmidt	
2.3 STREET ADDRESS	3011 N.E. 57th Court	
2.4 CITY-ST-ZIP	Fort Lauderdale, Fl. 33308	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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.

SIGNATURE:  Rene Goulon, President 4/11/97 954-334-9199

CR2E034 (9/96)