

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

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Mar 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000056034 (9)

1. Corporation Name:
UNITED INTERACTIVE PARTNERS, INC.



Principal Place of Business:
6065 NW 167TH ST.
UNIT B-14
MIAMI FL 33015

Mailing Address:
6065 NW 167TH ST.
UNIT B-14
MIAMI FL 33015-4329

3. Date Incorporated or Qualified 07/28/1994	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0556392	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business:	2a. Mailing Address:
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent
THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81. Name: Dianne Mercer
82. Street Address (P.O. Box Number is Not Acceptable): 6065 NW 167th Street
83. Unit B-14
84. City: Miami FL 85. Zip Code: 33015

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: *Dianne M. Mercer* Dianne M. Mercer, President 3/21/97
(Not to be signed by the corporation or its agent, if applicable) (NCH: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	MERCER, DIANNE	1.2 NAME	
STREET ADDRESS	C/O 6065 NW 167TH ST., UNIT B-14	1.3 STREET ADDRESS	
CITY-STATE-ZIP	MIAMI FL 33015	1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	MAGRUDER, LORI	2.2 NAME	
STREET ADDRESS	C/O 6065 NW 167TH ST., UNIT B-14	2.3 STREET ADDRESS	
CITY-STATE-ZIP	MIAMI FL 33015	2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	MATHE, ERICK L	3.2 NAME	
STREET ADDRESS	C/O 6065 NW 167TH ST., UNIT B-14	3.3 STREET ADDRESS	
CITY-STATE-ZIP	MIAMI FL 33015	3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	KYLE, JOHN N II	4.2 NAME	
STREET ADDRESS	C/O 6065 NW 167TH ST., UNIT B-14	4.3 STREET ADDRESS	
CITY-STATE-ZIP	MIAMI FL 33015	4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		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 disclosed 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: *Dianne M. Mercer* Dianne M. Mercer 3-17-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)