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

DOCUMENT # P9400056034 (9)

UNITED INTERACTIVE PARTNERS, INC.

P94000056034 (9) E PARTNERS, INC. FILED
May 12 1998 8:00am
Secretary of State



Principal Place	of Business	Mailing Address						
6085 NW 167TH ST. 6085 NW 167TI								
UNIT B-14		UNIT B-14			DO NOT W	DO NOT WRITE IN THIS SPACE		
MIAMI FL 33015 MIAMI FL 33015						3. Date Incorporated or Qualified		
					07/28/1994	100		
9 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21 5400	Hancock Road	26 5400 Hanc	∞k	Roa	d 65-0556392		Not Applicable	
Suite, Apt. 6		Suite, Apt. #, etc.				\$£	3.75 Additional	
22		27			Certificate of Status Desire		Fee Required	
City & State	_	City & State			6. Election Campaign Financi	ng \$	5.00 May Be	
23 Ft. LO	ruderdale, FL	28 Fr. Laude	rdal	e, Fa	 Trust Fund Contribution 		Added to Fees	
Zip	Country	Zip	Coun		8. This corporation owes or h	· — ·		
24 333	1201	11	30	<u>usa</u>	Personal Property Tax due			
	9. Name and Address of Current	Registered Agent		w1 w -	10. Name and Address of Ne	w Registered Agen	<u>t</u>	
	RCER, DIANNE			1 Name				
6065 NW 167 ST					eet Address (P.O. Box Number is Not Acceptable)			
UNIT B-14					00 Hancock k	100d		
MIAMI FL 33015 83						•		
			Į	34 City		85	Zip Code	
				F+	Lauderdale	FL °°	33330	
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statute:	s, the abo	ove-named	corporation submits this statement for	the purpose of char accept the appointm	nging its registered	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE .	Deathe Mer					4-21-9	18	
	Signature, typed or printed name of registered agent			Agent signature	required when reinstating)	DATE	FOTODO IN 40	
12.	OFFICERS AND	DIRECTORS DELETE	13.	-	ADDITIONS/CHANGES TO	JEFICERS AND DIR	Change Addition	
TITLE	MERCER, DIANNE	L Vitter	1.1 IIIL					
HAME	C/O 6065 NW 167TH ST., UNI	T R.14		AE EET ADDRESS	5400 Hancoci	e Koak	-	
STREET ADDRESS	MIAMI FL 33015	1 0-14			Fr. Landerdo	le Pl	33330	
CITY-ST-ZIP	D	DELETE	2.1 TiTL	r-ST-ZIP		ाव्य	Phange	
TITLE	MAGRUDER, LORI	C) beccir	2.2 NAN	-		- 4		
NAME	C/O 6065 NW 167TH ST., UNI	T R.14		eet address	SUM Hancock	, Real		
STREET ADDRESS	MAMI FL 33015	1 0-14			5400 Hancock	He R :	<i>33330</i>	
CITY-ST-ZIP	D	DELETE	3.1 TITL	Y-ST-ZIP			Change Addition	
TITLE	MATHE, ERICK L	OLLUIC	3.2 NAN	-	, , ,	<i>a</i> •		
NAME	C/O 8065 NW 167TH ST., UNI	T R-14		AE EET ADORESS	5400 Hancock	- Kood	-	
STREET ADDRESS	MAMI FL 33015	I M 17		Y-ST-ZIP	5400 Hancock Ft. Lauderd	ale A.	33 <i>330</i>	
CITY-ST-ZVP TITLE	D	DELETE	4.1 TITL			/	Change Addition	
NAME	KYLE, JOHN N II	qual society	4.2 NA			0.1		
STREET ADDRESS	C/O 6065 NW 167TH ST., UNI	T B-14		EET ADDRESS	5400 Hancock	KOOL		
	MIAMI FL 33015			Y-ST-ZIP	5400 Hancock F1. Lauderd	ale Fi	3 <i>333</i> 0	
CITY-ST-ZIP TITLE	***************************************	DELETE	5.1 TITL				Change Addition	
NAME			5.2 NAA					
STREET ADDRESS				eet address				
				Y-ST-ZIP				
CITY-ST-ZIP TITLE		DELETE	6.1 TITL				Change Addition	
1 1			6.2 NAM					
NAME CONCET LOODSEC				EET ADDRESS				
STREET ADDRESS				Y-ST-ZIP				
CITY-ST-ZIP	edify that the information supplied will	this filing does not qualify for			L ed in Section 119.07(3)(i), Florida Statu	ites. I further certify	that the information	

4. I 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.

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Crawie Berent

4/21/98

954-431-3144