

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000076195 (4)

1. Corporation Name

UNLIMITED PROPERTIES OF FLORIDA INC.



Principal Place of Business

Mailing Address

120 UNIVERSITY PARK DR.
STE. 280-A
WINTER PARK FL 32792

5404 DALE LANE
ORLANDO FL 32822

3. Date Incorporated or Qualified
10/14/1994

3a. Date of Last Report
08/14/1995

2. Principal Place of Business

2a. Mailing Address

21 3001 ALOMA AVE

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 112

27

City & State

City & State

23 WINTER PARK FL

28

Zip

Country

Zip

Country

24 32792

25 ORANGE

29

30

4. FEI Number

59-3274806

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOLINA, JULIO
8614 BRACKENWOOD DRIVE
ORLANDO FL 32829

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME DE LA ROSA, FRANCISCO
STREET ADDRESS C/O 5404 DALE LANE
CITY - ST - ZIP ORLANDO FL 32822

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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11 TITLE S
12 NAME DELSY GUZMAN
13 STREET ADDRESS 2052 EXCALIBUR DRIVE
14 CITY - ST - ZIP ORLANDO FL 32822

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Francisco De La Rosa

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANCISCO DELA ROSA

6/20/96

407-281-6009

Date

Daytime Phone

CR2E034 (3/96)