

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

**FILED**  
**Mar 09 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000023595 (8)**  
 1. Corporation Name  
**UNITED DATA TECHNOLOGIES, INC.**



Principal Place of Business <b>7212 N.W. 56TH STREET MIAMI FL 33016</b>	Mailing Address <b>P.O. BOX 821068 SOUTH FLORIDA FL 33082</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>03/23/1995</b>		Applied For <input type="checkbox"/> Not Applicable	
2. Principal Place of Business 21 <b>7212 N.W. 56th St.</b> Suite, Apt. #, etc.	2a. Mailing Address 26 <b>7212 N.W. 56th St.</b> Suite, Apt. #, etc.	4. FEI Number <b>65-0566138</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
22 City & State 23 <b>Miami, FL</b>	27 City & State 28 <b>Miami, FL</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24 Zip <b>33166</b> 25 Country <b>U.S.</b>	29 Zip <b>33166</b> 30 Country	10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent  
**FLECHES, ENRIQUE A  
 16825 N.W. 83RD COURT  
 MIAMI LAKES FL 33016**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>

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: *Enrique A. Fleches* **Enrique A. Fleches 02-23-98** DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DVPS</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FLECHES, ENRIQUE A</b>	1.2 NAME	
STREET ADDRESS	<b>16825 N.W. 83RD COURT</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI LAKES FL 33016</b>	1.4 CITY-ST-ZIP	
TITLE	<b>DPT</b> <input type="checkbox"/> DELETE	2.1 TITLE	<b>DPT</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>AMANO, GERADD</b>	2.2 NAME	<b>Amano, Gerard</b>
STREET ADDRESS	<b>974 SW 179TH AVENUE</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PEMBROKE PINES FL 33029</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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.

SIGNATURE: *Enrique A. Fleches* **Enrique A. Fleches 02-23-98 805-882-0426**

CR2E034 (10/97)