SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT .1998 **DOCUMENT #** UNIVER, INC.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000045361 (9)

FILED Sep 09 1998 8:00am Secretary of State

2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For Confliction Set 15 Australia Substitution Set 15 Australia Set 15 Austra	Principal Place of Business Mailing Address 5250 KIM CT WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415							TE IN THIS	BACE.			
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28		#, etc.	<u>├</u> ~┐				5. Certificate of Status Desired	atus Desired \$8.75 Additional				
25 28 36 Personal Property Tax due June 30. Vis No		e	├-¬ `				, , , , , , , , , , , , , , , , , , , ,					
TORVINEN, ARHO SZOD KIM CT WEST PALM BEACH FL 33415 11. Pursuant to the provisions of sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered operation or registering again, or both, in the State of Florida, Sush change was authorized by the corporation submits this statement for the purpose of changing its registered operation or registering again, or both, in the State of Florida, Sush change was authorized by the corporation's board of directors. Thereby accept the appointment as registered operation or registering again, or both, in the State of Florida, Sush change was authorized by the corporation's board of directors. Thereby accept the appointment as registered operation or registered again, or both, in the State of Florida, Sush changes authorized by the corporation's board of directors. Thereby accept the appointment as registered operation or registered again, or both, in the State of Florida, Sush changes is submit as proportion to board of directors. Thereby accept the appointment as registered operation and the state of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered operation and the state of t	·	Country	Zip	Cour	Country		8. This corporation owes or has p	aid the curre	nt year i	I <u>nta</u> ngible		
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LOTWINEN, ARHO SZ80 KM CT WEST PALM BEACH FL 33415 E3 Street Address (P.O. Box Number is Not Acceptable) E3 E4 City FL 85 Zip Code			t Registered Agent		04 11		10. Name and Address of New R	egistered A	gent			
WEST PALM BEACH FL 33415 63					א ויפ	ame						
83				82			Address (P.O. Box Number Is Not Acceptable)					
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 egent. Jam familiar with, and accept the obligations of, section 607.0505, Florida Statutes, agent. Jam familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE Description De	WES	T PALM BEACH FL 33415		,								
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 obeging its registered agent, or both, in the State of Florida, Stoch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, section 607.0505, Florida Statutes, agent, and familier with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE Speake, type or private name of registered agent and the lapticable NOTE Registered Agent signature request when releasting DATE				j	83							
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, 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, or both, in the State of Florida. Such change is greated agent. I am familiar with an accept the obligations of, section 607.0505, Florida Stateties. SIGNATURE					84 C	ity		FL_	85 Zi	p Code		
12.	office or i	registered agent, or both, in the State	of Florida, Such change was a	uthorized	by the	ned corpore corporation	ation submits this statement for the purious board of directors. I hereby accept	rpose of cha I the appoint	nging Its ment as	registered registered		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12.	SIGNATURE.											
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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 even an attachment with any address.

SIGNATURE:

0901 1998

561-6978869