


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 19, 2005 08:00**  
**Secretary of State**

<b>DOCUMENT # P96000061250</b> 1. Entity Name UNIPAT, INC.	
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Principal Place of Business C/O STEPHEN M. STONE ESQ. 725 N. MAGNOLIA AVENUE ORLANDO, FL 32803 US	Mailing Address C/O STEPHEN M. STONE ESQ. 725 N. MAGNOLIA AVENUE ORLANDO, FL 32803 US
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**DO NOT WRITE IN THIS SPACE**



07072005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3396882	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

STONE, STEPHEN M  
725 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32803

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ANDRADE, RUYMAR 1468 LANGHAM TERR. HEATHROW, FL 32746
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07/19/05-80005-018 155.00

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

**SIGNATURE:** \_\_\_\_\_ **07/11/2005** **407-805-3048**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**RUYMAR ANDRADE, PRES.**