

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 MOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 10, 1999 8:00 am
Secretary of State

09-10-1999 90012 010 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000102396

UNSET SPECIALTIES & PRINTING SERVICES, INC.



Principal Place of Business	Mailing Address
SOUTH ORANGE AVENUE ORLANDO FL	2503 SOUTH ORANGE AVENUE ORLANDO FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/12/1996	
4. FEI Number 59-3415867	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	

26	27	28	29	30
Principal Place of Business 2938 Forsyth Rd		2a. Mailing Address 2938 Forsyth Rd		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State Winter Park, FL		City & State Winter Park, FL		
Zip 32792	Country	Zip 32792	Country	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CALIFAR, JEFFREY L 1010 PACES CIRCLE APARTMENT 214 APOPKA FL 32703		81 Name	85 Zip Code
		82 Street Address (P.O. Box Number is Not Acceptable)	FL
		83	
		84 City	

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.

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

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE D CALIFAR, JEFFREY L 4804 CEDAR BAY ST ORLANDO FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	1.1 TITLE	
<input type="checkbox"/> DELETE D CALIFAR, TIMOTHY J 4804 CEDAR BAY ST ORLANDO FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
		2.1 TITLE	
		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE	
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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: *Jeffrey L. Califar* **9-10-99 (407) 657-2844**

CR2E034 (5/99)