

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000094280

1. Entity Name

UNIPLAS CORPORATION

Principal Place of Business

Mailing Address

235 HUNT CLUB BLVD
STE 201
LONGWOOD FL 32779

235 HUNT CLUB BLVD
STE 201
LONGWOOD FL 32779-7113

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2700946

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANDOLI, RAYMOND
104 GOLF CLUB DR.
LONGWOOD FL 32779

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
IRAWAN, GAWAIN
132 JOO SENG ROAD, UNIPLAS BLDG. NO. 0801
SINGAPORE 36858 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LANDOLI, RAYMOND
104 GOLF CLUB DR.
LONGWOOD FL 32779 ☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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CITY-ST-ZIP
☐ Change ☐ Add

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13. 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 11 or Block 12 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

R. Landoli
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-4-00

4077881699

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90014 003 ***150.00

A0000748



DO NOT WRITE IN THIS SPACE