## FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

**PROFIT** Apr 17 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortam **ANNUAL REPORT** Secretary of State Secretary of St. 1998 DIVISION OF CORPO ATIONS DOCUMENT # P97000098137 (7) UNI-EXPORT SERVICES, INC. Principal Place of Business Mailing Address 21346 ST ANDREWS BLVD 21346 ST ANDREWS BLVD SUITE 177 SUITE 177 DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33433 BOCA RATON FL 33433** 3. Date Incorporated or Qualified 11/17/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0797126 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Zφ Country Country This corporation owes or has paid the current year Intangible ☐ No 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name BERTHOLINO, RINALDO 21346 ST ANDREWS BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 177 83 **BOCA RATON FL 33433** 84 City Zip Code 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 obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1 1 TITLE Addition NAME BERTHOLINO, RINALDO 1.2 NAME 21346 ST ANDREWS BLVD STE 177 STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIF **BOCA RATON FL 33433** 1,4 CITY - ST- ZIP DELETE TITLE 2.1 TITLE Change Addition BERTHOLINO, CLAUDIA F NAME 2.2 NAME 21346 ST ANDREWS BLVD STE 177 STREET ADORESS 2.3 STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change TIT1 F Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETÉ Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE TITLE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Channe Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 City - St - 7/P

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 eddress.

**FILED**