FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000100841 (0)

UCT. EXPORT, INC.

Principal Place of Business

Mailing Address

FILED Mar 02 1998 8:00am Secretary of State



10743 DRUMN		10743 DRUMMOND ROAD			
OAMPA FL 33	015	OAMPA FL 33615			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					12/01/1997
	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21 10743 DRUMMOND RD		26 10743 DRUMMONDRA			59 - 3479918 Not Applicable
Suite, Apt.	F, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27			Fee Required
City & State		City & State	= /		6. Election Campaign Financing \$5.00 May Be
23 TAN		1001			Trust Fund Contribution
Zip 24 33んり	Country	Zip 20 33615 3	Countr ► 1 •	56	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24 3361	25 USA 9. Name and Address of Curren	1201		<u></u>	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
A 9.51	ERILAWYER	r negisteren Agent	81	Name	10, Maille Bild Addiess of New Hogestered Agent
	ALMERIA AVENUE		82	Street A	Address (P.O. Box Number Is Not Acceptable)
CU	RAL GABLES FL 33134		83	 	
			١٠٠		
			84	City	FI 85 Zip Code
44 5	40	O and COT 4500 Florida Otto	41.0.01.0.		
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 ar	n familiar with, and accept the obliga	ations of, Section 607.0505, Florid	da Statute	8	
SIGNATURE .					required when reinslating) DATE
12.	Signature, typed or printed name of registered age OFFICERS ANI		13.	ent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	DELETE	1.1 TOTLE	1	TSTD ★ Change
NAME	TRASAK, VACCLAV K		1.2 NAME		TRASAK IVACLAV K
STREET ADDRESS	10743 DRUMMOND ROAD			T ADDRESS	1243 DEUMNOUS ES
******	QAMPA FL 33615		1.4 CITY-		TAMPA FL 33615
CITY-ST-ZIP TITLE	WARRA LE 00010	☐ DELETE	2.1 TITLE	31.71	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			1	F ADORESS	*
			2. 4 CITY-		T'
CITY-ST-ZIP TITLE		DELETE	3.1 TITLE	31-211	☐ Change ☐ Addition
NAME			3.2 NAME		_ , _
			•	F ADDRESS	
STREET ADDRESS			3.4. CITY-		
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	01-EH	☐ Change ☐ Addition
		—	4. 2 NAME	ŀ	
NAME				T ADDRESS	
STREET ADDRESS			4.3 STREE		
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
			5.2 NAME		
NAME				F ADDRESS	
STREET ADDRESS			5.4 CITY-		
CITY+ST-ZIP		DELETE	6.1 TITLE	31 - ZIF	Change Addition
TITLE		_ bearing	6.2 NAME		Em country Em Factorion
NAME		ř		LADUDEGG	
STREET ADDRESS			<u> </u>	ADDRESS	
CITY-ST-ZIP	ertify that the information supplied w	ith this filing does not qualify for t	6.4 CPY-	tion state	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indiantad .	en this enquet capart or cumplaments	il annual renotti is true and accur:	ate an e e	nois vm.	nature shall have the same legal effect as it made under gath; that I am anI
officer or director of the corporation or the receiver or truggles ampowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attaching his with an address.					
		1/ /.		1	1. 1. () > (120)

2/23/98 (813)8556429