04-21-1999 90171 005 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



Katherine Harris Secretary of State **DIVISION OF CORPORATIONS**

FLORIDA DEPARTMENT OF STATE

DOCUMENT # P98000055972

1. Corporation Name

UADSER, INC.

Principal Place of Business

Mailing Address

2150 WHITFIELD INDUSTRIAL WAY SARASOTA FL 34243

2150 WHITFIELD INDUSTRIAL WAY SARASOTA FL 34243

					DO NOT WRIT	E IN THIS SPACE	
					3. Date Incorporated or Qualifed		
					06/23/1998		Ì
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21 2559	STONY BROOK LN.		Re.	ook Ln	65-0849635	No	t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.	1			\$8.75 <i>A</i>	Additional
22 27					5. Certificate of Status Desired	Fee Re	quired
City & State City & State			_	_	6. Election Campaign Financing	□ \$5.00	
23 CLEARWATER - FL 28 CLEARWATE			<u>ک</u> 7	· L-	Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Country		8. This corporation owes the curre		_ (
24 337	61 25 USA	29 33761 3	10 U	SA	Personal Property Tax.	Yes	□No
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
			81	Name			
PFLUGNER, J G				82 Street Address (P.O. Box Number is Not Acceptable)			
C/O ICARD-MERRILL							
2033 MAIN STREET #101			83				
\$AR/	AȘOTA FL 34237		84	City		85 Zip (Code
			04	City		FL S Z	
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	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: F	Registered Age	nt signature requir	red when reinstating)	DATE	
12: OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFF		RS IN 12
TITLE	D	DELETE	1.1 TITLE			Change	☐ Addition
NAME	SALTSMAN, GEORGE'S JR.						ĺ
STREET ADDRESS 2150 WHITFIELD INDUSTRIAL WAY			1.3 STREE	TADDRESS 2	559 STONY BROW	, נעל אַלפ	
CITY-ST-ZIP	SARASOTA FL 34243	•••	1.4 CITY-S	T. 7IP	LEARWATER, TL	33761	1
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME		_	2.2 NAME				
1				T ADDRESS			í
STREET ADDRESS			2.4 CITÝ-				
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	or-ur		Change	Addition
			3.2 NAME			_ •	_
NAME STREET ADDRESS	,			TADDRESS	در المحاد يستنيدن ميسينيت	-	
CITY-ST-ZIP	•		3.4. CITY-				ì
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4.2 NAME				
STREET ADDRESS				T ADDRESS]
			4.4 CITY-S				İ
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	II-AF	*********	☐ Change	☐ Addition
l l		<u></u>	5.2 NAME				_
NAME CTREET ADDRESS				T ADDRESS		•	

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 receive for trusted 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CiTY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

☐ Addition