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Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90053 042 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # **P98000094934**

1. Corporation Name

UNILIFE, INC.

Principal Place of Business

Mailing Address

**3134 W. COACHMAN AVE.
 TAMPA, FL 33611**
**PO BOX 14308
 TAMPA, FL 33690**


5 7 3 8 9
 573009 - 90026 - 13

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

23 NOV. 1995

4. FEI Number

59-2542220

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75** Additional Fee Required

6. Election Campaign Financing

☐**\$5.00** May Be Added to Fees

8. This corporation owes the current year intangible

Personal Property Tax.

☐ Yes☐ No

2. Principal Place of Business

**3134 W. COACHMAN AVE.
 Suite, Apt. #, etc.**

2a. Mailing Address

**PO BOX 14308
 Suite, Apt. #, etc.**

City & State

TAMPA, FL

City & State

TAMPA, FL

Zip

33611

Country

USA

Zip

33690

Country

USA

9. Name and Address of Current Registered Agent

**ELSIE SANCHEZ
 313 ALMENDRA AVE.
 CORAL GABLES, FL 33134**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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

Signature, typed or printed name of registered agent is id title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6-22-99

12. OFFICERS AND DIRECTORS

PRESIDENT ☐ DELETE
THOMAS M. PETH
3134 W. COACHMAN AVE.
TAMPA, FL 33611

SECRETARY ☐ DELETE
THOMAS M. PETH
3134 W. COACHMAN AVE.
TAMPA, FL 33611

TREASURER ☐ DELETE
THOMAS M. PETH
3134 W. COACHMAN AVE.
TAMPA, FL 33611

☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(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 307, 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER (OR DIRECTOR)

4/16/99

(813) 835-7322

Telephone Number

CR2E034 (11/98)