

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90053 024 ***150.00

DOCUMENT # P99000013305
 1. Entity Name
 UNITED CAPITAL GROUP OF FLORIDA, INC.



Principal Place of Business: 81 MATTHEW BLVD. DESTIN, FL 32541
 Mailing Address: 81 MATTHEW BLVD. DESTIN, FL 32541

33010667



01272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3559692 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 LIPTON, RICHARD
 81 MATHEW BLVD
 DESTIN, FL 32541

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|--------------------------------|
| TITLE | PD |
| NAME | LIPTON, RICHARD |
| STREET ADDRESS | 81 MATTHEW BLVD. |
| CITY-ST-ZIP | DESTIN, FL 32541 |
| TITLE | SR |
| NAME | LIZARIUS, CHARLES |
| STREET ADDRESS | 1610 BARRACUS AVE |
| CITY-ST-ZIP | PENSACOLA, FL 32501 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Date: 2-17-04 Daytime Phone #: 850-650-6714