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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$47276

1. Corporation Name					
UNISYS SERVICES AMERICA, INC.					
Principal Plac	e of Business	Mailing Address			
1760 E CENTRAL AVE. P.O. BOX 879					
MERRITT ISLAND FL 32952 TITUSVILLE FL 32781 US		TITUSVILLE FL 32781 .		DO NOT WRITE IN THIS	ODACE
,		US		3. Date incorporated or Qualifed	SPACE
				04/23/1991	
2 Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	,	26		59-3063602	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.		33 3000002	\$8.75 Additional
22	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27		5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Int	
24	25 29		Personal Property Tax.		
1	9. Name and Address of Current			10. Name and Address of New Registered	Agent
81 Name					
MARKEY, KEVIN P ESQUIRE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
410 W MERRITT AVENUE		02 Street Addi	ess (r.o. box Number is Not Acceptable)	The second second second	
MER	RITT ISLAND FL 32953		83	1. 1977年 (李载) 乌鸦如果	5.63 额点张 图摄
			04 000		
			84 City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above-named corp	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoi	changing its registered
office or r	registered agent, or both, in the State our im familiar with, and accept the obligation	of Florida. Such change was autions of Section 607 0505. Florid	thorized by the corporation	on's board of directors. I hereby accept the appoint	ntment as registered
·	an rannal wat, and accept the congate	01, 0001011 001.0000, 11011	au otatutoo.		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signature required	d when reinstating). DATE	
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE .	PD	· DELETE	1.1 T/TLE	I de la company	Change Addition
NAME	LAURETTA, ANTONIO		1.2 NAME	•	
STREET ADDRESS	P.O. BOX 321355 N/A		1.3 STREET ADDRESS	•	
CITY-ST-ZIP	COCOA BEACH FL 32932		1.4 CITY-ST-ZIP		, .
TITLE	VPD	☐ DELETE	2.1 TITLE		
NAME	KELLY, ROBERT W	•			☐ Change ☐ Addition
STREET ADDRESS	1760 E. CENTRAL AVE.		2.2 NAME		☐ Change ☐ Addition
CITY-ST-ZIP		•	2.2 NAME 2.3 STREET ADDRESS		☐ Change ☐ Addition
	MERRITT ISLAND FL 32952				☐ Change ☐ Addition
TITLE 443-5	VDP	☐ DELETE	2.3 STREET ADDRESS		☐ Change ☐ Addition☐ Change ☐ Addition☐
TITLE NAME.	VDP EVANS, KENT G	☐ OELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
2.1	VDP	☐ DELETE	2.3 STREET ADDRESS 2.4 CFTY-ST-ZIP 3.1 TITLE		
NAME.	VDP EVANS, KENT G		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		
NAME. STREET ADDRESS	VDP EVANS, KENT G 117 W. OSCEOLA LANE COCOA BCH FL 32931 STD	☐ DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		
NAME. STREET ADDRESS CITY-ST-ZIP	VDP EVANS, KENT G 117 W. OSCEOLA LANE COCOA BCH FL 32931 STD FERGUSON, JAMES W	. DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		Change Addition
NAME. STREET ADDRESS CITY-ST-ZIP	VDP EVANS, KENT G 117 W. OSCEOLA LANE COCOA BCH FL 32931 STD	. DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
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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 trostee 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.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP:

FILED

Jan 27, 1999 8:00am

Secretary of State

01-27-1999 90036 029 ***150.00