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

FILED Apr 10 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # (3)UNIPLEX, INC. Principal Place of Business Mailing Address 527 E UNIVERSITY AVE 527 E UNIVERSITY AVE GAINESVILLE FL 32001-5451 GAINESVILLE FL 32601 3. Date Incorporated or Qualified 3a. Date of Last Report 05/17/1991 03/05/1996 2. Principal Place of Business 26. Mailing Address 26. 3601 Applied For 3601 N. DIXIE HWY N. DIXIE HWY 26 59-3139387 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\sigma\) No 25 PALM BEACH 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TOVKACH, WALTER M. 527 E. UNIVERSITY AVENUE 82 **GAINESVILLE FL 32601** NW 83 84 JAINESVILLE 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 opent, 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 any antitatively the original florida statutes. SIGNATURI (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. DELETE Change Addition 1.1 TITLE Tuna BJORKSTEN, DARGAR W. NAME 1.2 NAME 1019 RUSSELL DRIVE #2 STREET ADDIRESS 1.3 STREET ADDRESS HIGHLAND BECACH FL CITY-S1-7P 1.4 CITY - ST - ZIP DELETE ☐ Change ☐ Addition TILLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TillE MAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE THE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS COTY \$1-710 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE 1011 5.2 NAME NAME STREET ADORESS 5.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do 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 eath, 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 12 or Block 13 if changed, or on an attachment with an address

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

TITLE

NAME STEEL: ADDRESS

DELETE

561 368 4547

0065663

Change

Addition

(96/6)