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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

UNIGLOBE MAIN EVENTS INC.

FILED	
Apr 24 1998 8:00am	1
Secretary of State	

|--|

Principal Plac	e of Business	Mailing	g Address				(Itali bilaid bilia atifa iniaa kuta labi atau atau atau atau atau atau atau ata		
5280 CARRO	LL CANYON RD	1199	WEST PENDER ST						
STE - 210 SAN DIEGO	CA 92121	STE -	- 900 Xouver BC V6E2R				DO NOT WRITE IN THIS SPACE		
US		CA					3. Date Incorporated or Qualified		
							09/23/1992		
2. Principal P	lace of Business	2a. Ma	iling Address				4. FEI Number Applied For		
21		26					59-3145309 Not Applicable		
Suite, Apt.	#, etc.	Su	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional		
22		27	<u> </u>				Fee Required		
City & Stat	e	h	City & State				6. Election Campaign Financing \$5.00 May Be		
23			28				Trust Fund Contribution		
Zip	Country	Zip)	} 1	intry		8. This corporation owes or has paid the current year Intangible		
24	25	29	d Amont	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
	9, Name and Address of Currer	ir wedintere	n Agent		81	Name			
	YER, DAVID A					Harrio			
	RUDNICK & WOLFE 1 E KENNEDY BLVD SUITE 2000	n			82	Street /	t Address (P.O. Box Number is Not Acceptable)		
	MPA FL 33602-5133	,			83				
					84	City	85 Zip Code		
							FL S P OOO		
11. Pursuant office or agent. I a	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							ure required when reinstating) DATE		
40	Signature typed or printed name of registered agr OFFICERS AN		·	13.	d Age	ni signature	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	COBD	ID DINECTO	DELETE	1.1 1	TLE		Change Addition		
NAME	CHARLWOOD, U. G		C.J Pacara	1.2 N					
STREET ADDRESS	900-1199 W. PENDER ST.					ADDRESS	,		
	VANCOUVER, BC				ITY - S!		·		
CITY-ST-ZIP TITLE	PD		DELETE	21 TI		1-10	Change Addition		
NAME	ANDERSON, THOMAS		<u> </u>	2.2 N					
STREET ADDRESS	5280 CARROLL CANYON RD	#210				address			
	SAN DIEGO CA 92121					ST-ZIP			
CITY-ST-ZIP TITLE	ST		DELETE	3.1 Ti		51 - Z4F	Change Addition		
NAME	BARTRAM, TRACY			32 N					
STREET ADDRESS	5280 CARROLL CANYON RD) #210				ADDRESS			
	SAN DIEGO CA 92121	-, == 10				ST-ZIP			
CITY-ST-ZIP TITLE	O'TT DIEGO O'T OF IET		DELETE	4.1 TI		pi - £IF	☐ Change ☐ Addition		
NAME				4.2 N					
STREET ADDRESS						ADDRESS	,		
CITY-ST-ZIP					ITY-S				
TITLE			DELETE	51 TI		· <u>F"</u>	Change Addition		
NAME				5.2 N					
STREET ADDRESS						ADDRESS	,		
CITY-ST-ZIP					ITY-S				
TITLE			DELETE	61 TI			Change Addition		
NAME	1			6.2 N					
				i i		ADDRESS			
STREET ADDRESS					ITY-S		'		
CITY-ST-ZIP	contitutival the information supplied w	with this filing	does not qualify				stand in Section 119.07(3)(i). Florida Statutes. I further certify that the information		

rnereby certify triat the information supplied with this hilling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual roport 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on partitlecture my with an address.

SIGNATURE: