

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 550199

**Entity Name:** UNITED INVESTMENTS, INC.

**Current Principal Place of Business:**

2933 S. FLORIDA AVE.  
SUITE 4  
LAKELAND, FL 33803

**Current Mailing Address:**

2933 S. FLORIDA AVE.  
SUITE 4  
LAKELAND, FL 33803

**FEI Number:** 59-1772759

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SCHARAR, TOM E  
2933 S FLORIDA AVE  
SUITE 4  
LAKELAND, FL 33803 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR, PRESIDENT  
Name           SCHARAR, TOM E  
Address        2933 S FLORIDA AVE #4  
City-State-Zip: LAKELAND FL 33803

Title           DIRECTOR, SECRETARY, VP  
Name           SCHARAR, DAPHNE  
Address        1202 BRIARBROOK  
City-State-Zip: HOUSTON TX 77042

Title           ASST. SECRETARY  
Name           SCHARAR, RYAN  
Address        2322 WILLING AVENUE  
City-State-Zip: FT WORTH TX 76110

Title           TREASURER  
Name           DOHERTY, CHRISTINA  
Address        7622 WINDSWEPT LN  
City-State-Zip: HOUSTON TX 77063

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** TOM E SCHARAR

**PRESIDENT**

**01/10/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date