

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED  
AND  
FILED**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

96 FEB -6 AM 10:17

**DOCUMENT # M39569**

**(2)**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Corporation Name  
**BUILT UNIQUE CORP.**



Principal Place of Business

2000 S. DIXIE HWY.  
SUITE 100  
MIAMI FL 33133

Mailing Address

2000 S. DIXIE HWY.  
SUITE 100  
MIAMI FL 33133

3. Date Incorporated or Qualified <b>10/06/1986</b>	3a. Date of Last Report <b>08/03/1995</b>
4. FEI Number <b>65-0275176</b>	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ABBASSI, HAMID R.  
2000 S. DIXIE HWY.  
SUITE 100  
MIAMI FL 33133**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>
85 Zip Code	

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 607.0509, Florida Statutes.

SIGNATURE

Signature of the individual who is the registered agent

FLORIDA REGISTERED AGENT'S QUALIFICATION STATEMENT

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PT</b>	TITLE	<b>PT</b>
NAME	<b>ABBASSI, HAMID REZA</b>	NAME	<b>Ray Abbassi</b>
STREET ADDRESS	<b>2000 S DIXIE HWY #100</b>	13 STREET ADDRESS	<b>2000 So. Dixie Hwy., #100, Miami, Fla.</b>
CITY, ST, ZIP	<b>MIAMI FL</b>	14 CITY, ST, ZIP	
TITLE	<b>VS</b>	TITLE	<b>VS</b>
NAME	<b>ABBASSI, ALI R</b>	NAME	<b>Hamid Abbassi</b>
STREET ADDRESS	<b>2000 SO DIXIE HWY #100</b>	23 STREET ADDRESS	<b>2000 So. Dixie Hwy., #100, Miami, Fla.</b>
CITY, ST, ZIP	<b>MIAMI FL</b>	24 CITY, ST, ZIP	<b>33133</b>
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY, ST, ZIP		34 CITY, ST, ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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.

SIGNATURE:

*Ali R Abbassi*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/96 (25) 856-5858

CR2E034 (12/95)