

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 SEP 15 PM 12:01

DOCUMENT # 477129 1. Entity Name UNIQUE AIR, INC.					
Principal Place of Business 4515 19TH STREET COURT EAST BRADENTON, FL 34203 US			Mailing Address 4515 19TH STREET COURT EAST BRADENTON, FL 34203 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1605624	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOERR, KENNETH D 240 S. PINEAPPLE AVE., 10TH FLOOR SARASOTA, FL 34236			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
8. 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. I am familiar with, and accept the obligations of registered agent.			SIGNATURE <u><i>Kenneth D Doerr</i></u> 9/12/08 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MONTGOMERY, MICHAEL 4515 19TH STREET COURT EAST BRADENTON, FL 34203	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSV MARCHISELLI, EDWARD J 4515 19TH STREET COURT EAST BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HOLTSBEKE, ROBERT A 4515 19TH STREET COURT EAST BRADENTON, FL 34203	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HOLTSBEKE, ROBERT A 4515 19TH STREET COURT EAST BRADENTON, FL 34203	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HOLTSBEKE, ROBERT A 4515 19TH STREET COURT EAST BRADENTON, FL 34203	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.					
SIGNATURE: <u><i>[Signature]</i></u> 9/14/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					