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

PROFIT CORPORATION ANNUAL REPORT **1997**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

FILED

Mar 14 1997 8:00am

Secretary of State

Change

Addition

Change Addition

DOCUMENT # H49407

(0)

UNIQUE & PRECIOUS, INC.

Principal Plac	ce of Business	Mailing Address					
UNIQUE & PRECIOUS. INC. 284 OHIO ROAD LAKE WORTH FL 33467 US 2. Principal Place of Business		284 OHIO ROAD LAKE WORTH FL 3	UNIQUE & PRECIOUS. INC. 284 OHIO ROAD LAKE WORTH FL 33467-4822				
		US			3. Date Incorporated or Qualified	3a. Date of Last Report	
				03/25/1985	04/22/1996		
		2a. Mailing Addres	├─- ₁ ″		4. FEI Number	Applied For	
Suite, Apt. #, etc.		[26]	26		59-2545059	Not Applicable	
22		<u>}</u>	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			& Flation Companies Francisco		
23		1 1	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip		Country	8. This corporation has liability for i		
24	25	29	30	•		Yes No	
1	9, Name and Address of Cur		1291_		10. Name and Address of New Re		
GARRY M. GLICKMAN 1801 FORUM PLACE STE 1101				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83			
WE:	ST PALM BEACH FL 33401					lank at the land	
				84 City		FL 85 Zip Code	
11. Pursuant office or agent. La SIGNATURE	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the ob-	0502 and 607, 1508, Florida ale of Florida Such chango bligations of, Section 607.08	sus, Florida (Statules.	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered	
	Signature, typod or punted name of registered			dered Agent signature req		DATE.	
12.	,	AND DIRECTORS		3.	ADDITIONS/CHANGES TO OFFIC		
TITLE	P 4444	□ DELE		1 111LE		Change Addition	
NAME	MANNELLA, JAMES		1	2 NAME			
STREET ADDRESS	284 OHIO ROAD		1	.3 STREET ADDRESS			
CITY-ST-ZIP	LAKE WORTH FL			.4 CHY-S1-7IP			
TITLE		L_J DELE		.1 7/11.6		Change Addition	
NAME				.2 NAME			
STREET ADORESS				.3 STREET ADDRESS			
CITY-ST-ZIP		D DECE		. 4 CITY - ST - ZIF	<u> </u>		
TITLE		☐ DELF	1	A TITLE		Change Addition	
NAME				.2 NAME			
STREET ADDRESS				.3 STREET ADORESS			
CITY-ST-ZIP		T but		4 CITY-ST-ZIP			
TITLE		☐ DELE		.1 10Lf		Change Addition	
NAME				. 2 NAME			
STREET ADDRESS				3 STREET ADDRESS			
CITY-ST-ZIP			4	4 CHY-ST-7IP			

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling 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 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 changed, or on an attachment with an address.

5.1 UILE

5.2 NAME

61 TITLE

62 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - 7(P

DELETE

DELETE

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

110 1 100