## 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 # 1. Corporation Name H49407

(0)

UNIQUE & PRECIOUS, INC.

**FILED** Apr 22 1998 8:00am Secretary of State

21 284 ( Suite, Apt. 6 22 City & State	ECIOUS. INC. AD FL 33467  SCO Of Business  OHIO RU  I, etc.  Country	Suite, Apt. #, etc. 27 City & State	orth Fl	DO NOT WRITE IN THIS  3. Date Incorporated or Qualified 03/25/1985  4. FEI Number 59-2545059  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees urrent year Intangible
	9. Name and Address of Currer	11	[30]	Personal Property Tax due June 30.  10. Name and Address of New Registered	YesNo Agent
160 STE	RRY M. GLICKMAN 1 FORUM PLACE 1101 BT PALM BEACH FL 33401		81 Name  82 Street Addr  83 City	ress (P.O. Box Number is Not Acceptable)	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fforida 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 Fforida. 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	Signature, Typed or printed name of registered age				
12.	OFFICERS AN		Registered Agent signature require	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTORS IN 40
TITLE	ρ	DELETE	1.1 TITLE	ADDITIONS/OFFAMULE TO OFFICERS AN	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	MANNELLA, JAMES 284 OHIO ROAD LAKE WORTH FL		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		
TITLE NAME		☐ DELETE	2.1 TITLE		Change Addition
STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP	•	
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		İ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELET <b>E</b>	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	···		5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		7.	6.4 CITY - ST - 2IP		
efficer or di	<b>n this annual report or supplementa</b>	l annual report is true <b>and a</b> ccu iver or trustee empowered to e	trate and that my signatur	Section 119.07(3)(i), Florida Statutes. I further or re shall have the same legal effect as if made un uired by Chapter 607, Florida Statutes; and that	nder noth: that I am an