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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # H70287 1. Corporation Name

UNIQUE RESERVATIONS, INC.

## **FILED** Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90029 039 \*\*\*150.00



Principal Plac	e of Business	Mailing Address		
107 13TH AVE 107 13		107 13TH AVE INDIAN ROCKS BEAHC FL 34	1635	
US		US		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed 08/08/1985
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21 80 i	BULBAY DRIVE	26 801 40 A	ACT DE	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	1	5 Certificate of Status Desired   \$8.75 Additional
22 50	ITE 800	27 SUITE	800	Fee Required
City & Stat	Ge FL 33770	City & State	FL	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip Country Zip Country 8. This corporation owes the current year Intangible 24 43 7 7 C 30 P A C L B Personal Property Tax.				
24 33770 25 PILELLAS 29 33 770 30 PILELLAS Personal Property Tax.   Yes				
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
CARRABUS, ANDREW  81 Name ETIENNE H. DEBROW				
420 HARBOR DR S				Address (P.O. Box Number is Not Acceptable)
PO BOX 555			25	409 OAKS 13CUD-
INDIAN ROCKS BEACH FL 33535			83	
			84 City	0 0 0 0 0 FL 85 Zip Code 34/39
11 Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the above named	compration submits this statement for the number of changing its registered
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. For 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. Lam familiar with accept the obligations of Section 607.0505, Florida Statutes.				
SIGNATURE	Signature seed seed raine of registered age	Hite if abolicable: (NOTE: Re	egistered Agent signature re	squired when reinstatino)  DATE  DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 TITLE	☐ Change Addition
NAME	CARRABUS, ANDREW	-	1.2 NAME	ETIENNE DEBROOM
STREET ADDRESS	420 HARBOR DR S., PO BOX 55	5		
CITY-ST-ZIP	INDIAN ROCKS BCH FL	•	1.3 STREET ADDRESS	25409 OAKS BLUD-
TITLE	11.00 41 1100110 0011 1 E	<b></b> !	1.3 STREET ADDRESS 1.4 CITY- ST-ZIP	23 707
TITLE	VTD	□ DELETE		23 70 7 0 7 7 7
NAME			1.4 CITY-ST-ZIP	LANDOLANES, FL 34639
]	VTD		1.4 CITY-ST-ZIP 2.1 TITLE	LANDOLANES, FL 34639
NAME	VTD BORBELY, WILLIAM 2666 KETTLE POND RD S GALSTONBURY CT		1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	LANDOLANES, FL 34639
NAME STREET ADORESS	VTD BORBELY, WILLIAM 2666 KETTLE POND RD S GALSTONBURY CT SD		1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	LANDOLANES, FL 34639
NAME STREET ADORESS CITY-ST-ZIP	VTD BORBELY, WILLIAM 2666 KETTLE POND RD S GALSTONBURY CT SD GREENWALD, CHARLES	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Change Addition
NAME STREET ADORESS CITY-ST-ZIP TITLE	VTD BORBELY, WILLIAM 2666 KETTLE POND RD S GALSTONBURY CT SD GREENWALD, CHARLES 124 HEBRON AVE	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	Change Addition
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14. I hereby certify that the information supplied with this filing 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 of 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 in polattachment with an address, with all other like empowered.

SIGNATURE:

4 199 1-800-544-7604