

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K85395

(7)

1. Corporation Name

UNIQUE FLORAL CREATIONS, INC.

Principal Place of Business

9720 PRINCESS PALM AVE. STE 114
TAMPA FL 33619

Mailing Address

9720 PRINCESS PALM AVE. STE 114
TAMPA FL 33619



3. Date Incorporated or Qualified

05/03/1989

3a. Date of Last Report

01/25/1995

4. FEI Number

59-2944420

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 9602 E Martin Luther King Blvd.

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Tampa

24 Zip 33610

25 Country Hillsboro

27 City & State

28

29

30

Country

9. Name and Address of Current Registered Agent

PIARROT, YEONA C.
9720 PRINCESS PALM
SUITE 114
TAMPA FL 33619

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 9602 E M.L.K Blvd

84 City Tampa

FL

85 Zip Code 33610

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 607.0505, Florida Statutes.

SIGNATURE

Yeona Piarrot, Yeona Piarrot

5/30/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P
STREET ADDRESS PIARROT, YEONA C.
CITY-ST-ZIP 7205 S 49TH AVE
TAMPA FL

TITLE ☐ DELETE

NAME ST
STREET ADDRESS KOFFLER, LEONARD
CITY-ST-ZIP 4801 FAIR OAKS AVE.
TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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:

Yeona Piarrot, President
Yeona Piarrot

5/31/96 813) 621-4808

CR2E034 (12/95)