

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L46829

FILED
Apr 19, 2007
Secretary of State

Entity Name: UNIQUE RESTAURANT OF MIZNER PARK, INC.

Current Principal Place of Business:

428 PLAZA REAL
APT. 239
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

428 PLAZA REAL
APT. 239
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 59-2994701 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAX, DENNIS
428 PLAZA REAL #239
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MAX, DENNIS
Address: 428 PLAZA REAL, APT. 239
City-St-Zip: BOCA RATON, FL 33432 US

Title: D () Delete
Name: RAPOPORT, BURT
Address: 5801 N.W. 21 ST. WAY
City-St-Zip: BOCA RATON, FL 334963457 US

Title: DAS () Delete
Name: MAX, PATTI
Address: 428 PLAZA REAL, APT. 239
City-St-Zip: BOCA RATON, FL 33432 US

Title: DS () Delete
Name: STAMPONE, FREDERICK
Address: 1017 HERKNESS DRIVE
City-St-Zip: MEADOWBROOK, PA 19046 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS MAX

DP

04/19/2007

Electronic Signature of Signing Officer or Director

Date