

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 # M14844 (8)

1. Corporation Name

UNIQUE HOME DESIGN, INC.



Principal Place of Business

Mailing Address

11756 SW 108 CT
MIAMI FL 33176
US

17510 SO DIXIE HWY
MIAMI FL 33157
US

2. Principal Place of Business

2a. Mailing Address

21 17510 SOUTH DIXIE HWY

26 SAME AS ABOVE

Suite, Apt. #, etc

Suite, Apt. #, etc

22 City & State

27 City & State

23 MIAMI, FL

28 City & State

24 Zip 33157 25 Country USA

29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERNARD, ANTHONY

16156 SW 117 AVE 16201 SW 95 Ave #109
B-8 MIAMI FL 33157 MIAMI, FL 33157

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0532 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

Signature typed or printed (either of registered agent or of state official)

(If Not Registered Agent Signature Registered When Filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/D
NAME LAROCHE, JACQUES R.
STREET ADDRESS 17510 SO DIXIE HWY
CITY- ST- ZIP MIAMI FL

☐ DELETE

TITLE D
NAME LAROCHE, YVETTE
STREET ADDRESS 17081 PERRINE AVE
CITY- ST- ZIP MIAMI FL 33176

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Digitized by P. J. Lee

CR2E034 (12/95)