

2012 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # M33130

1. Entity Name

UNICORN ENTERPRISES INTERNATIONAL, INC.



12 APR 10 PM 2:57

Principal Place of Business
6495 S.W. 8TH STREET
MIAMI FL 33144

Mailing Address
6495 S.W. 8TH STREET
MIAMI FL 33144

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number NO-T APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of Now Registered Agent

QUINTANA, DAVID M.
6495 S.W. 8TH STREET
MIAMI FL 33144

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title of application

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW! FEE IS \$150.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 APR 11 or APR 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David M. Quintana (DIRECTOR)
DAVID M. QUINTANA

3/18/2012 A. DUNLAP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE OF FILING