


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 26, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000043963</b>	
1. Entity Name UNIQUE MOBILE CAR DETAIL, INC.	

Principal Place of Business 126 TUSCANY DR ROYAL PALM BEACH, FL 33411	Mailing Address 126 TUSCANY DR ROYAL PALM BEACH, FL 33411
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07232007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1035500	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  ZALDIVAR, LUIS A 126 TUSCANY DR ROYAL PALM BEACH, FL 33411
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**DO NOT WRITE  
IN THIS SPACE**

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 fee if applicable) (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 14, 2007**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZALDIVAR, LUIS A 126 TUSCANY DR ROYAL PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZALDIVAR, MELISSA 126 TUSCANY DR ROYAL PALM BEACH, FL 33411
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07/26/07-80003-013 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:  \_\_\_\_\_  
(Signature and typed or printed name of signing officer or director)

7/23/07 954-444-6874  
Date Daytime Phone #