

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 23, 2001 08:00 AM**
Secretary of State**DOCUMENT # P00000093722**1. Entity Name
ULTIMATE SERVICES UNIQUE, INC.Principal Place of Business
7227 WAREHAM DRIVE
TAMPA FL 33647Mailing Address
7227 WAREHAM DRIVE
TAMPA FL 33647

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number
59-3674669

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentCLAIRMONTE MARGARET C
7227 WAREHAM DRIVE
TAMPA FL 33647**7. Name and Address of New Registered Agent**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.

SIGNATURE _____ **04/23/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	33647	<input type="checkbox"/> Delete
ST	CAECIOLA CATHERINE	16134 COMPTON PALMS DRIVE	TAMPA	FL	33647	<input type="checkbox"/> Delete
VP	BRAMMER WALTER L	7227 WAREHAM DRIVE	TAMPA	FL	33647	<input type="checkbox"/> Delete
P	CLAIRMONTE MARGARET C	7227 WAREHAM DRIVE	TAMPA	FL	33647	<input type="checkbox"/> Delete
						<input type="checkbox"/> Delete
						<input type="checkbox"/> Delete
						<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	33647	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
ST	CACCIOLA CATHERINE	16134 COMPTON PALMS DRIVE	TAMPA	FL	33647	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
VP	CATHERINE CACCIOLA M	16134 COMPTON PALMS DRIVE	TAMPA	FL	33647	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
						<input type="checkbox"/> Change	<input type="checkbox"/> Addition
						<input type="checkbox"/> Change	<input type="checkbox"/> Addition
						<input type="checkbox"/> Change	<input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHERINE M CACCIOLA

VP

04/23/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)