

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90222 025 ***150.00

DOCUMENT # P01000058730	
1. Entity Name UNIQUE DESIGN BUILDERS, INC.	

Principal Place of Business 3244 W 70 TERR HIALEAH, FL 33018	Mailing Address 3244 W 70 TERR HIALEAH, FL 33018
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2. Principal Place of Business 30614 SW 152ct Suite, Apt. #, etc. Homestead, FL	3. Mailing Address 30614 SW 152ct Suite, Apt. #, etc. Homestead, FL
City & State 33033	City & State 33033
Zip	Country



04262004 Chg-P CR2E034 (10/03)

4. FEI Number APPLIED FOR 65-1112105		Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent GONZALEZ, JAVIER R 3244 W 70 TERR HIALEAH, FL 33018		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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and the filer (check one) (If filer is Registered Agent signature is required when recasting) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GONZALEZ, JAVIER R 3244 W 70 TERR HIALEAH, FL 33018 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. 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 included 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 filer empowered.

SIGNATURE: *James Chavez* **4/15/04 (305) 231-5757**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR