

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000066899

Entity Name: UNIQUE BRANDING, INC.

FILED
Feb 11, 2005
Secretary of State

Current Principal Place of Business:

511 SANTANDER
APT. #2
CORAL GABLES, FL 33134

Current Mailing Address:

511 SANTANDER
APT. #2
CORAL GABLES, FL 33134

New Principal Place of Business:

9709 HAMMOCKS BLVD
APT. 203
MIAMI, FL 33196

New Mailing Address:

9709 HAMMOCKS BLVD
APT. #203
MIAMI, FL 33196

FEI Number: 65-1119893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARKE, JAMES E
511 SANTANDER
APT. #2
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

CLARKE, JAMES E
9709 HAMMOCKS BLVD.
APT. #203
MIAMI, FL 33196 US

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:

02/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: CLARKE, JAMES E
Address: 511 SANTANDER, #2
City-St-Zip: CORAL GABLES, FL 33134

Title: VS () Delete
Name: CLARKE, MARIA B
Address: 511 SANTANDER, #2
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: CLARKE, JAMES E
Address: 9709 HAMMOCKS BLVD. , #203
City-St-Zip: MIAMI, FL 33196

Title: VS (X) Change () Addition
Name: CLARKE, MARIA B
Address: 9709 HAMMOCKS BLVD. , #203
City-St-Zip: MIAMI, FL 33196

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES E. CLARKE

PS

02/11/2005

Electronic Signature of Signing Officer or Director

Date