


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 12, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000076007 1. Entity Name UNIQUE INVESTMENTS, INC.	
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Principal Place of Business 15600 N.W. 27TH PLACE MIAMI, FL 33054	Mailing Address 15600 N.W. 27TH PLACE MIAMI, FL 33054
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DO NOT WRITE IN THIS SPACE



06042007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1124062	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

RUDOLPH, JASON S
44 WEST FLAGLER STREET STE 2400
MIAMI, FL 33130

**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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP IVORY, VELENCIA 15600 N.W. 27TH PLACE MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V IVORY, HELEN 15600 NW 27TH PL OPA LOCKA, FL 33054
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06/12/07-80001-025 150.00

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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: VELENCIA IVORY DP 4/28/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #