

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000108623

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** UNIQUE SOLUTIONS APPROACH, INC.

**Current Principal Place of Business:**

112 SE PECKHAM ST.  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

18859 ASHCROFT CIRCLE  
PORT CHARLOTTE, FL 33948

**Current Mailing Address:**

112 SE PECKHAM ST.  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

18859 ASHCROFT CIRCLE  
PORT CHARLOTTE, FL 33948

**FEI Number:** 65-1152783

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILL, KARREN MARIE  
112 SE PECKHAM ST.  
PORT CHARLOTTE, FL 33952 US

**Name and Address of New Registered Agent:**

HILL, KARREN MARIE  
18859 ASHCROFT CIRCLE  
PORT CHARLOTTE, FL 33948 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: KARREN HILL

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HILL, JAMES DAVID  
Address: 18859 ASHCROFT CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D  
Name: HILL, KARREN MARIE  
Address: 18859 ASHCROFT CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948

I hereby 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 all other like empowered.

SIGNATURE: JAMES HILL

PRES

04/28/2011

Electronic Signature of Signing Officer or Director

Date