

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000008050

FILED  
May 23, 2008  
Secretary of State

Entity Name: UNIQUE HANDMADE CREATIONS, INC.

## Current Principal Place of Business:

13275 SW 136TH STREET  
28  
MIAMI, FL 33186

## New Principal Place of Business:

9575 SW 145TH CT  
MIAMI, FL 33186

## Current Mailing Address:

P.O. BOX 94-1117  
MIAMI, FL 33194

## New Mailing Address:

FEI Number: 03-0405527

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSELL, SANDRA  
13275 SW 136TH STREET  
28  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

ROSELL, SANDRA  
9575 SW 145TH CT  
MIAMI, FL 33186 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: SANDI ROSELL

05/23/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: ROSELL, SANDI  
Address: 13275 SW 136TH STREET #28  
City-St-Zip: MIAMI, FL 33186

Title: P ( ) Delete  
Name: ROSELL, JESUS  
Address: 13275 SW 136TH STREET #28  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: ROSELL, SANDI  
Address: 9575 SW 145TH CT  
City-St-Zip: MIAMI, FL 33186

Title: P (X) Change ( ) Addition  
Name: ROSELL, JESUS  
Address: 9575 SW 145TH CT  
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SANDI ROSELL

P

05/23/2008

Electronic Signature of Signing Officer or Director

Date