2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR P02000102914 **DOCUMENT #**

Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

1. Entity Name UNIQUE FLOORS, INC.



Principal Place of Business 4722 SOUTHWEST 67TH AVE STE A-10 MIAMI FL 33155

2. Principal Place of Business

SPIEGEL & UTRERA, P.A.

the obligations of registered agent.

1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145

SIGNATURE

Çity & State

Mailing Address 4722 SOUTHWEST 67TH AVE STE A-10

15325E 1011 AVE

MIAMI FL 33155

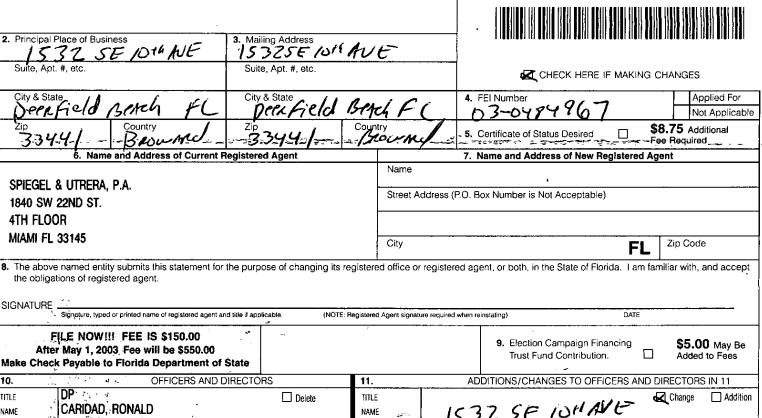
3. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Apr 11, 2003 8:00 am Secretary of State

04-11-2003 90167 026 ***150.00



Make Check	Payable to Florida Department of State	raser and commodition.		0 10 1 663			
10	OFFICERS AND DIRECTORS	S	11.	AD	DITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CARIDAD, RONALD 4722 SOUTHWEST 67TH AVE STE A-10 MIAMI FL 33155	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	153	2 SE IOHAVE PERFIELD BACK PC	- R Change	☐ Addition
TITLE NAME: STREET ADDRESS CITY-ST-ZIP	DV CARIDAD, ROLANDO 4722 SOUTHWEST 67TH AVE STE A-10 MIAMI FL 33155	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	15 Dei	325E-1011 AV	73441	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURBR RENATO QUARANTA 9970 SW 30 ST MIAMI, FL 33165	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME -STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition

City

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 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 peport 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 office like empowered.