2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2011
Secretary of State

DOCUMENT# P02000129026

Entity Name: UNIQUE MEDICAL SUPPLIES, INC.

Current Principal Place of Business:

4421 ANNETTE ST
STE 7
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

4050 WESTGATE AVE
STE 104
WEST PALM BEACH, FL 33409 US

Current Mailing Address:

4421 ANNETTE ST
STE 7
WEST PALM BEACH, FL 33409 US

New Mailing Address:

4050 WESTGATE AVE
STE 104
WEST PALM BEACH, FL 33409 US

FEI Number: 42-1564924 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POITIER, SHAUNICO
4012 LAKE TAHOW CIRCLE
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

POITIER, SHAUNICO
4050 WESTGATE AVE
STE 104
WEST PALM BEACH, FL 33409 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: SHAUNICO POITIER 04/12/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: ALIANCIN, ISAAC
Address: 4050 WESTGATE AVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: D
Name: THOMAS, EDDY
Address: 4050 WESTGATE AVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: D
Name: POITIER, SHAUNICO
Address: 4050 WESTGATE AVE
City-St-Zip: WEST PALM BEACH, FL 33409

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: ISAAC ALIANCIN DIR 04/12/2011
Electronic Signature of Signing Officer or Director Date