

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000139380

FILED
Feb 06, 2006
Secretary of State

Entity Name: UNIQUE INTERIOR FINISHES, INC.

Current Principal Place of Business:

7698 COLONY LAKE DR
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

7698 COLONY LAKE DR
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 20-0443974 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEVEN, WARM ESQUIRE
2101 NW CORPORATE BLVD.
SUITE 215
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOYLE, SEAN M
Address: 7698 COLONY LAKE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: ECKERT, WILLIAM W
Address: 7698 COLONY LAKE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: T () Delete
Name: BOYLE, SEAN M
Address: 7698 COLONY LAKE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: S () Delete
Name: BOYLE, MELISSA M
Address: 7698 COLONY LAKE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BOYLE, MELISSA M
Address: 7698 COLONY LAKE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AVP () Change (X) Addition
Name: FROMKES, ERIN
Address: 825 MACY STREET
City-St-Zip: WEST PALM BEACH, FL 33405

I hereby certify that the information supplied with this filing does not qualify for the 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: SEAN BOYLE

P

02/06/2006

Electronic Signature of Signing Officer or Director

_____ Date