## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000125869

FILED Mar 20, 2007 Secretary of State

Entity Nai	me: DEPTH(	OF SOUL UNIQUITIES, INC.				
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:		
812 WOODSTREAM LANE CASSELBERRY, FL 32707				105 MITNIK DRIVE DELTONA, FL 32738		
Current M	lailing Addre	ss:	New Maili	New Mailing Address:		
812 WOODSTREAM LANE CASSELBERRY, FL 32707				105 MITNIK DRIVE DELTONA, FL 32738		
FEI Number:	: 13-4311844	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of	f Status Desired ( )	
Name and Address of Current Registered Agent: N				Name and Address of New Registered Agent:		
1607 NE 1	DENNIS JR, E 05TH STREE 33138 US	Τ				
	named entity e of Florida.	submits this statement for the	purpose of changing	its registered office or regis	tered agent, or both,	
SIGNATU						
	Electro	nic Signature of Registered Ag	ent	Date	Э	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	,	RÉAM LANE	Title: Name: Address: City-St-Zip:	P (X) Change ( ) A WAXMAN-LOYD, JENNIFER 105 MITNIK DRIVE DELTONA, FL 32738	ddition	

Address:

Address:

City-St-Zip:

City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition Name:

GIRONZ, JAIME GIROUX, JAIME Name: 812 WOODSTREAM LANE Address: 105 MITNIK DRIVE CASSELBERRY, FL 32707 DELTONA, FL 32738 City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition Name:

BROWN, KENNETH T Name: BROWN, KENNETH T 812 WOODSTREAM LANE Address: 106 CLOVE COURT CASSELBERRY, FL 32707 City-St-Zip: LONGWOOD, FL 32750

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: JENNIFER WAXMAN-LOYD Ρ 03/20/2007