2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000131028

Entity Name: UNIQUE TROPICAL REAL ESTATE & INVESTMENTS CORP

FILED Sep 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7606 SW 7TH PLACE 4823 NW 96 AVE NORTH LAUDERDALE, FL 33068 SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

7606 SW 7TH PLACE 4823 NW 96 AVE NORTH LAUDERDALE, FL 33068 SUNRISE, FL 33351

FEI Number: 20-5669655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHOVAN, MARION K
7606 SW 7TH PLACE
NORTH LAUDERDALE, FL 33068 US
SHOVAN, MARION K
4823 NW 96 AVENUE
SUNRISE, FL 33351 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: 09/02/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

NORTH LAUDERDALE, FL 33068

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SUNRISE, FL 33351

City-St-Zip:

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

 Name:
 SHOVAN, MARION K
 Name:
 SHOVAN, MARION K

 Address:
 7606 SW 7TH PLACE
 Address:
 4823 NW 96 AVENUE

 City-St-Zip:
 NORTH LAUDERDALE, FL 33068
 City-St-Zip:
 SUNRISE, FL 33351

Title: P () Delete Title: P (X) Change () Addition Name: SHOVAN, CHRISTOPHER K Name: SHOVAN, CHRISTOPHER K Address: 4823 NW 96 AVENUE

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: MARION K SHOVAN VP 09/02/2008

Deplement | State | St Re: Refund of "Paraly Fee" for Annual Report Filing Document + P06000131028 For - Unique Tropical Real Estate "Investments Corp. I received a NOTICE OF INTENT to DISSOLVE" postcard in the mail in July 2008. I Phought I had until September 3, 2008 to fite my Annual Report. When I went on line to fite on Suppember 2, 2008 I togot to click the box to waive the penalty fee. I never received the 1st notice ove to a change of Address which is now correct in the system I am requesting to hwethe Fennety Fre waived. Please make Check payable to Marion Kay Shovan, if approved. Hease Mail To: 4823 N.W. 96 Avenue Survise, Florida *3*335/