## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087552

Entity Name: UNIQUE BARBER SHOP CORP

FILED Apr 07, 2008 Secretary of State

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

5011 NW 187TH ST 5011 NW 187TH STREET OPA LOCKA, FL 33055 US 0PA LOCKA, FL 33055 US

Current Mailing Address: New Mailing Address:

5011 NW 187TH ST 5011 NW 187TH STREET OPA LOCKA, FL 33055 US 0PA LOCKA, FL 33055 US

FEI Number: 26-0295659 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:

ARAGON, DANY
5011 NW 187TH ST
OPA LOCKA, FL 33055 US

ARAGON, DANY
5011 NW 187TH STREET
OPA LOCKA, FL 33055 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: DANY ARAGON 04/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: PSD (X) Change ( ) Addition

Name: ARAGON, DANY Name: ARAGON, DANY

 Address:
 5011 NW 187TH ST
 Address:
 5011 NW 187TH STREET

 City-St-Zip:
 OPA LOCKA, FL 33055 US
 City-St-Zip:
 OPA LOCKA, FL 33055 US

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: DANY ARAGON PSD 04/07/2008