

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000072208

**FILED**  
**Mar 29, 2009**  
**Secretary of State**

**Entity Name:** LIBERTY'S UNIQUE INVESTMENTS, INC.

**Current Principal Place of Business:**

16759 TANGERINE BLVD  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 213212  
ROYAL PALM BEACH, FL 334213212

**New Mailing Address:**

**FEI Number:** 80-0228840

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GENTILE, JOHN D  
1601 N PALM AVE SUITE 212  
PEMBROKE PINES, FL 33026 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: DPT ( ) Delete  
Name: TRISTANO, JAMES  
Address: PO BOX 213212  
City-St-Zip: ROYAL PALM BEACH, FL 334213212

Title: DS ( ) Delete  
Name: TRISTANO, LYNN  
Address: PO BOX 213212  
City-St-Zip: ROYAL PALM BEACH, FL 334213212

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPT (X) Change ( ) Addition  
Name: TRISTANO, LYNN  
Address: PO BOX 213212  
City-St-Zip: ROYAL PALM BEACH, FL 334213212

Title: DS (X) Change ( ) Addition  
Name: TRISTANO, JIM  
Address: PO BOX 213212  
City-St-Zip: ROYAL PALM BEACH, FL 334213212

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:** LYNN TRISTANO

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03/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date