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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P92000006899**1. Corporation Name

UNIQUE AUTO UPHOLSTERY, INC.

Principal Plac	e of Business		Ma	iling Addres	is				-			o iik (3 11) 68 1	I ab iid bii a i ia	HAN HANKO KOTI KONI
12965 NE 14TH AVE NORTH MIAMI FL 33161			129	1296S NE 14TH AVE NORTH MIAMI FL 33161										
US			US									ITE IN THI	S SPACE	
									3.	11/20/1992	or Qualifed	<u> </u>		
2. Principal P	Place of Business	-	2a.	Mailing Add	dress				4.	FEI Number				Applied For
21	·· ··		26					. ———		65-0378687				Not Applicable
Suite, Apt.	#, etc.		27	Suite, Apt. a	#, etc.				5.	Certificate of Status	Desired			Additional Required
City & Stat	te			City & State	e				6.	Election Campaign	Financing		\$5.0	May Be
23			28							Trust Fund Contrib	ution			to Fees
Zip	Cou	intry		Zip		Countr	тy		8.	This corporation ov	ves the cur	rent year Ir	ntangible	
24	25		29			30				Personal Property	Тах.		Yes	□No
	9. Name and Ad	dress of Currer	nt Regist	tered Agent	t				10.	Name and Addres	s of New	Registered	Agent	
050	400E 0EUMADIA					81	1 1	Name						. [
	ASSIE, SEUNARIN	E				8:	2 0	Street Addre	oce (D	O. Box Number is	Not Accept	able)		
	5 NE 133RD ST					"	~ `	Olicet Addit	coa (r	.O. DOX (NUMBER IS	NO Accept	anie)		ł
NOF	RTH MIAMI FL 3316	51				83	3				_	-		
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office or r	to the provisions of S egistered agent, or b	oth, in the State	of Florida	a. Such chai	nge was at	uthorized by	y the	e corporatio	on's bo	ard of directors. I he	ereby acce	pt the appo	ointment as I	egistered
office or r	to the provisions of S registered agent, or b im familiar with, and a	oth, in the State	of Florida	a. Such chai	nge was at	uthorized by	y the	e corporatio	on's bo	oard of directors. I h	ereby acce	pt the appo	ointment as I	egistered
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP