FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000024701 (3) DOCUMENT #

UNIQUE PLASTERING, INC.

Mailing Address

FILED

May 06 1998 8:00am

Secretary of State

Principal Place of Business 19885 N.W. 54TH AVE. 19885 N.W. 54TH AVE. MIAMI FL 33055 MIAMI FL 33055 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/30/1993 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 26 65-0406340 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Zip Country Country Žip 8. This corporation owes or has paid the current year Intangible Yes □ No 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name DOWNS, Y. DEISY 19885 NW 54 AVENUE Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33055 83 Zip Code 85 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE DOWNS, JOHN G NAME 1.2 NAME 19885 N.W. 54TH AVE. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33055** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition DOWNS, Y D 2.2 NAME 19885 NW 54 AVE STREET ADDRESS 2.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE TITLE Change Addition 4.1 Title 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 1lTLE Change ■ Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME

14. Thereby certify that the information surplied 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 and that I am an officer or director of the corporation or the received of 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 changes

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

DETSY DOWNS

305) 6207860