

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000054894

FILED  
Apr 15, 2002 8:00 AM  
Secretary of State

**Entity Name:** UNIQUE MARKETING CONCEPTS, LTD., INC.

**Current Principal Place of Business:**

2600 FIORE WAY  
SUITE 101  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

2600 FIORE WAY  
SUITE 101  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

**FEI Number:** 65-0424793

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVID LERNER  
2600 FIORE WAY  
SUITE 101  
DELRAY BEACH, FL 33445

**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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: LERNER, DAVID  
Address: 2600 FIORE WAY STE 101  
City-St-Zip: DELRAY BEACH, FL 33445

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID LERNER

PRES

04/15/2002

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

\_\_\_\_\_  
Date