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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P93000075469 1. Corporation Name

FILED Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90080 040 ***150.00

UNIQUE POLYMERS, INC.				
Principal Place of Business	Mailing Address	·	— I CONCLANT DE PRESENTANT È DISTONDA	II 4000 0030 1000 000 000 000 000 000 000
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791 BONNIE BLVD PALM HARBOR FL 34684	791 BONNIE BLVD PALM HARBOR FL 34684			
US	US		DO NOT WRIT	E IN THIS SPACE
			3. Date Incorporated or Qualifed	
			11/01/1993	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0448055	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Country	28 Zin	Country	Trust Fund Contribution	Added to Fees
Zip Country	Zip		8. This corporation owes the curre	Yes No
24 25 9. Name and Address of Currel		30	Personal Property Tax. 10. Name and Address of New Re	
5. Name and Address of Curren	it Kegistered Agent	81 Name		3
KEOGH, RICHARD J				
791 BONNIE BLVD		82 Street Add	ress (P.O. Box Number is Not Acceptal	ble)
PALM HARBOR FL 34684		83		
		84 City (2)	DSMAR	FL 85 Zip Code 77
		-		
11 Pursuant to the provisions of Sections 607 050	02 and 607 1508 Florida Statute	s, the above-named com	poration submits this statement for the	ourpose of changing its registered
Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State	of Florida. Such change was au	ithorized by the corporati	poration submits this statement for the pion's board of directors. I hereby accept	purpose of changing its registered the appointment as registered
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CITY-ST-ZIP 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 a attachment with an address with all other like empowered.

SIGNATURE