

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000048961

Entity Name: UNIQUE CRAFTSMAN, INC.

FILED  
Jan 21, 2004  
Secretary of State

## Current Principal Place of Business:

1539 WEST RIVER LANE  
TAMPA, FL 33603

## New Principal Place of Business:

## Current Mailing Address:

1539 WEST RIVER LANE  
TAMPA, FL 33603

## New Mailing Address:

FEI Number: 59-3323044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHAVEZ, TROY  
1539 W RIVER LN  
TAMPA, FL 33603 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: D ( ) Delete  
Name: CHAVEZ, TROY  
Address: 1539 WEST RIVER LANE  
City-St-Zip: TAMPA, FL 33603

Title: VP ( ) Delete  
Name: CHAVEZ, PHILLIP  
Address: 904 RAWLINGS CIR  
City-St-Zip: LUTZ, FL 33549

Title: VP (X) Delete  
Name: WOOD, EDMOND  
Address: 16213 BONNEVILLE DR.  
City-St-Zip: TAMPA, FL 33624

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CHAVEZ, TROY A  
Address: 1539 WEST RIVER LANE  
City-St-Zip: TAMPA, FL 33603

Title: S (X) Change ( ) Addition  
Name: CHAVEZ, KIMBERLY A  
Address: 1539 W RIVER LANE  
City-St-Zip: TAMPA, FL 33603

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: TROY A CHAVEZ

P

01/21/2004

Electronic Signature of Signing Officer or Director

Date