

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 03, 2006 08:00 AM
Secretary of State**

DOCUMENT # P95000059373



1. Entity Name
UNIQUE SPECIES INC.

Principal Place of Business
**1190 E OHIO STREET
LAKE HELEN, FL 32744 US**

Mailing Address
**P.O. BOX 990
LAKE HELEN, FL 32744 US**



02232006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3360294 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HARDY, RICK
1190 E OHIO STREET
LAKE HELEN, FL 32744**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering.) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution... ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HARDY, RICK
STREET ADDRESS	1190 E. OHIO STREET
CITY-ST-ZIP	LAKE HELEN, FL
TITLE	V
NAME	HARDY, RAFFAELA
STREET ADDRESS	1190 E. OHIO STREET
CITY-ST-ZIP	LAKE HELEN, FL
TITLE	T
NAME	HARDY, LEWIS
STREET ADDRESS	1190 E. OHIO STREET
CITY-ST-ZIP	LAKE HELEN, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/15/06-80042-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Raffaella Hardy* **Raffaella Hardy, vice president**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/28/06 880228-352