

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 08:00 A
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**



03092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3360294	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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 reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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

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CITY-ST-ZIP

UD00000677264
03/30/07-80097-003 150.00

**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: *Richard A. Hardy*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/07
Date

386228-3525
Daytime Phone #