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Feb 06, 1999 8:00am

Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000078019

UNIQUE	CONCEPTS INTERNATIO	NAL, INC. Mailing Address	. <u>.</u>	i a	48.1				
Principal Place 7035 GLEN EAG	•	7035 GLEN EALGE (
MIAMI LAKES FL 33014 MIAMI LAKES FL 33014						DO NOT WRI	DO NOT WRITE IN THIS SPACE		
US						3. Date Incorporated or Qualifed			
						10/11/1995 4. FEI Number		Appl	ed For
2. Principal Pl	lace of Business	2a. Mailing Address	3			65-0624380			Applicable
21 Suite Ant	+	26 Suite, Apt. #, et	C.					\$8.75 Ad	
Suite, Apr. #, etc.						5. Certifcate of Status Desired	<u></u>	Fee Requ	
22 City & State City & State						6. Election Campaign Financing		\$5.00 ⋈	
23 28						Trust Fund Contribution		Added to	rees
Zip	Country Zip			Country		8. This corporation owes the current year Intangible]No -	
24	9. Name and Address of Current Registered Agent		30	30}		Personal Property Tax. Yes 1900 10. Name and Address of New Registered Agent			
	9. Name and Address of Curr	rent Registered Agent	***	81	Name	14- 114-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
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				84	City	The support of the second devices	FI	85 Zip Co	
11. Pursuant office or r agent. I a	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Registe	red Agent		oration submits this statement for the on's board of directors. I hereby access distribution of the oration of	DATE .	1 1	
12.		AND DIRECTORS		3. 1 TITLE		ADDITIONS/CHANGES TO O		☐ Change	Addition
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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 an attachment with an address, with all other like empowered.

SIGNATURE: POSITION FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305)821-1104