FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600001423 (8)

UNIQUE ORLANDO, INC.

STREET ADDRESS

Principal Place of Business Mailing Address					1 1001(001 110 00111 00111 00111 00111	··· ••··· ••·•· ·· ·• ·	P17 118 PE 1111 1881
490 EAST PALMETTO PARK ROAD SUITE 110 BOCA RATON FL 33432 BOCA RATON FL 33432					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
2 Principal	Place of Business	2a. Mailing Address			01/05/1996		
21 21 26					l .	4. FEI Number Applied For 59-3125104 Not Applied	
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			39-3123104	/ 60	Not Applicable 75 Additional
27					5. Certificate of Status Desired		Pe Required
		City & State	& State		6. Election Campaign Financing	\$5	.00 May Be
23		28			Trust Fund Contribution	☐ Ad	ded to Fees
Zip	Country	Zip	Country	•	8. This corporation owes or has pa		
24	25 25 Name and Address of Current R	29	30		Personal Property Tax due June		∐ No
h.		legistered Agent	81	Name	10. Name and Address of New Re	gistered Agent	
	AX DENNIS,		<u>.</u>	Name			
490 EAST PALMETTO PARK ROAD SUITE 110				Street Add	ress (P.O. Box Number is Not Acceptab	ele)	
BOCA RATON FL 33432			83				
	00// 14// 0// 12 00/02		-				
			84	City		FL 85	Zip Code
11. Pursuan	t to the provisions of Sections 607.0502 a registered agent, or both, in the State of	nd 607.1508, Florida Stat	lules, the above	-named corp	poration submits this statement for the p		ng its registered
agent. I	am familiar with, and accept the obligation	กเอาเอล. ธนตก change wa ns of, Section 607.0505,	s authorized by Florida Statute:	the corpora s.	tion's board of directors. I hereby accep	ol the appointmen	nt as registered
SIGNATURE.							i
45	Signature, typed or pointed name of registerin ages that			nt signature requi	red when reinstating)	DATE	
12. TITLE	OLFICERS AND DIRECTORS DP DELETE		13.		ADDITIONS/CHANGES TO OFFIC		
NAME	MAX, DENNIS		1.2 NAME			[_] Cha	nge L Addition
STREET ADDRESS				ADDRECC			
CITY-ST-ZIP	BOCA RATON FL 33432		1.3 STREET ADDRESS 1.4 City-St-7ip				
TITLE	DVPS DELETE		2.1 THTLE	1-211		Cha	nge Addition
NAME	RAPPORT, BURT		2.2 NAME				
STREET ADDRESS	490 E. PALMETTO PARK RD S	SUITE 110	2.3 STREFT	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33432		2.4 CITY - S				
TITLE	DT	DELETE	3.1 TITLE			☐ Cha	nge Addition
NAME	CATALFUMO, DAN		3.2 NAME				
STREET ADDRESS	490 E. PALMETTO PARK RD S	SUITE 110	3.3 STREET	address			
CITY-ST-ZIP	BOCA RATON FL 33432		3.4. CITY - 5	T-ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE	D MAY DATTI	L DELETE	4.1 TITLE			L_J Char	nge L Addition
NAME CTOSET ADDOSESS	MAX, PATTI 490 E. PALMBETTO PARK RD	CHITE 110	4. 2 NAME				
STREET ADDRESS CITY-ST-ZIP	BOCA RATON FL 33432	SUITE 110	4.3 STREET	1			ļ
TITLE	BOOM IMPORTE 33432	DELETE	4.4 CITY-S 5.1 TITLE	1 - 211'		Char	nge 🔲 Addition
NAME		orreit	5.1 TITLE 5.2 NAME			, LLI UIII	Igo [_] Addition
STREET ADDRESS			5.2 NAME 5.3 STREET	ADDRESS			
CITY-ST-ZIP			54 CHY-S				
TITLE		DELETE	61 TITLE	••••		Char	nge Addition
AIALAC				ı			

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 trusted 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.

6.3 STREET ADDRESS 6.4 City - St - Zip

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FILED

Apr 21 1998 8:00am

Secretary of State

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