2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000050906

Title:

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HERRAN, AGUSTIN

MIAMI, FL 33165

9688 SW 24 STREET

FILED Apr 18, 2009 Secretary of State

-	1e: UNQUEF	RA ENTERPRISES, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
2301 W 521 HIALEAH, F		US			
Current Mailing Address:			New Mailing Address:		
9688 SW 2 MIAMI, FL	4TH STREET 33165 US				
FEI Number:	65-0678749	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Addre	ss of New Registered Agent:	
MARQUEZ & MARCELO-ROBAINA, PA 6303 BLUE LAGOON DRIVE SUITE 390 MIAMI, FL 331266005 US			8500 S.W. 8TH S' SUITE 238	LAW OFFICES OF MACHADO & HERRAN, P.A. 8500 S.W. 8TH STREET SUITE 238 MIAMI, FL 33144 US	
The above in the State		submits this statement for the p	urpose of changing its regis	tered office or registered agent, or both,	
SIGNATURE: JOSE L. MACHADO				0.4/4.0/0.000	
				04/18/2009	
	Electro	nic Signature of Registered Age	nt	04/18/2009 Date	
Election Carr	Electro		nt		
	Electro	nic Signature of Registered Age			
	Electron Sign Financin	nic Signature of Registered Age g Trust Fund Contribution (). TORS:) Delete IUEL A		Date	
OFFICERS Title: Name: Address:	Electron paign Financin AND DIRECT COB (HERRAN, MAN 8460 SW 5 ST MIAMI, FL 331	nic Signature of Registered Age g Trust Fund Contribution (). CTORS:) Delete IUEL A . 144) Delete E A CANAL DR.	ADDITIONS/CHA Title: Name: Address:	Date NGES TO OFFICERS AND DIRECTORS:	
OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron paign Financin AND DIRECT COB (HERRAN, MAN 8460 SW 5 ST MIAMI, FL 331 VPD (HERRAN, JOS 8455 GRAND (MIAMI, FL 331	nic Signature of Registered Age g Trust Fund Contribution (). ETORS:) Delete IUEL A44) Delete E A CANAL DR44) Delete IEL R WAY	ADDITIONS/CHA Title: Name: Address: City-St-Zip: Title: Name: Address:	Date NGES TO OFFICERS AND DIRECTORS: () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: AGUSTIN HERRAN Ρ 04/18/2009

() Change () Addition