

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000064901

FILED
Apr 26, 2005
Secretary of State

Entity Name: UNIQUE CONSUMER CONCEPT, INC.

Current Principal Place of Business:

9143 PHILLIPS HIGHWAY
SUITE 550
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

9143 PHILLIPS HIGHWAY
SUITE 550
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 11-3336864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COVER, BRANDON M
500 VINCA PL
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

COVER, BRANDON M
9143 PHILIPS HIGHWAY
SUITE 550
JACKSONVILLE, FL 32256 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

04/26/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COVER, RANDY(BRANDON)
Address: 500 VINCA PLACE
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COVER, RANDY(BRANDON) M OWNER
Address: 9143 PHILIPS HWY, STE 550
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: RANDY COVER

Electronic Signature of Signing Officer or Director

D

04/26/2005

Date