## 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 # P97000034059 (0)

UNIQUE P.C. SERVICES INC.

## **FILED** Apr 08 1998 8:00am Secretary of State

este p.		

Principal Place		Mailing Address			.w		
540 N.W. 165TH ST. ROAD SUITE 200 MIAMI FL 33169		540 N.W. 165TH ST. F SUITE 200 MIAMI FL 33169				DO NOT WRITE IN THIS	SPACE
						3. Date Incorporated or Qualified	
9 Principal D	lace of Business	2a. Mailing Addyess				04/16/1997 4. FEI Number	Applied For
21	lace of business	26 P.O. BO	k			65-0748203	Not Applicable
Suite, Apt.	#, etc.	Sujte, Apt. #, etc.	Δ				\$8.75 Additional
22		27 145				5. Certificate of Status Desired	Fee Required
City & State	9	City & State	<b>-</b>			6. Election Campaign Financing	\$5.00 May Be
23		28 WAVIA. 6	<u>CA</u>			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou		1	8. This corporation owes or has paid the cu	rrent year Intangible
24	9. Name and Address of Curr	29 3300 4	30 7	مكن		Personal Property Tax due June 30.  10. Name and Address of New Registered	
DC	L GUIDICE, JOHN			<b>B1</b> N	Vame		<del></del>
	S.E. 13TH ST			<b>B2</b> 5	Stroot Addro	ess (P.O. Box Number is Not Acceptable)	
	NIA FL 33004			02	Street Addre	755 (F.O. DOX Hullion is NOT Acceptable)	
_				63			
				84 (	City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Sta	tutes, the at	bove-n	amed corpo	oration submits this statement for the nurpose of	of changing its registered
office or r agent. I a	egistered agent, or both, in the Stam familiar with, and accept the ob-	ate of Florida. Such change wa ligations of, Section 607.0505,	is authorized Florida Stat	d by th lutes.	ne corporation	on's board of directors. I hereby accept the app	pointment as registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (f)	NOTE Registered	d Apent s	signature require	nd when rainstating) DATE	
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	
TIFLE		☐ DELETE	1.1 11	TLE	- P	- ACC 1/ CTANE	Change Addition
NAME			1.2 N		5/1	IMAON V. STONE S.E 13AD & Y ONIA, FCA, 33004	
STREET ADDRESS				TREET AD	ORESS C	3,6,500	
CITY-ST-ZIP		DELETE		TY-ST-2	ZIP ROG	WIH, 5-CH, 53004	Change Addition
TITLE		Detter	2.1 11				
NAME			2.2 N/	amic Treet ad	DDCCC		
STREET ADDRESS				HTY-ST-			
CITY-ST-ZIP TITLE		DELETE	31 Ti		LIF		Change Addition
NAME			3.2 N	AME			
STREET ADDRESS			3.3 \$	TREET AD	DRESS		
CITY-SI-ZIP			3.4. 0	CITY-ST-	ZIP		
TITLE		DELETE	4.1 TI	ITLE			Change Addition
NAME			4.2 N	IAME	1		
STREET ADDRESS			4.3 S	treet ad	DRESS		
CITY-ST-ZIP				ITY-ST-	ZIP	<u> </u>	Change Addition
TITLE	,	☐ DELETE	5.1 Ti				Change Addition
NAME	1		5.2 N				
STREET ADDRESS				TREET AD			
CITY-ST-ZIP		DELETE	_	(TY-ST-)	ZIP		☐ Change ☐ A const
TITLE		ت مدرورو	6.1 T				- coming the
NAME			6.2 N		NDDECC		
STREET ADDRESS				TREET AD	l.		
14. I hereby	certify that the information supplie	d with this filing does not qualit		emptic		Section 119.07(3)(i), Florida Statutes. I further of	pertify that the informa

Thereby certify that the aniformation supplied with this timing does not quality for the exemption stated in Section 118.07(3)(f), 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 a 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.