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FILED

Apr 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000065104 (6)

1. Corporation Name
UNIQUE APARTMENTS, INC.



Principal Place of Business

21405 N.E. 19TH COURT
MIAMI FL 33179

Mailing Address

21405 N.E. 19TH COURT
MIAMI FL 33179

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/24/1997

4. FEI Number

65-0773068

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1777 Polk St

Suite, Apt. #, etc.

22 Suite 13

City & State

23 Hollywood FL

Zip

24 33020

Country

25 Broward

2a. Mailing Address

26 1777 Polk St

Suite, Apt. #, etc.

27 Suite 13

City & State

28 Hollywood FL

Zip

29 33020

Country

30 Broward

9. Name and Address of Current Registered Agent

KASIMOW, STEVEN
21405 N.E. 19TH COURT
MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name

KASIMOW, Steven

82 Street Address (P.O. Box Number is Not Acceptable)

1777 Polk St Suite 13

83

84 City

Hollywood

FL

85 Zip Code

33020

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Steven Kasimow

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

4/14/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
STREET ADDRESS PERL, BEZALEL
CITY - ST - ZIP 3 PINE DRIVE
WOODBURY NY 11797-1509

TITLE ☐ DELETE

NAME VPD
STREET ADDRESS PERK, JUDITH
CITY - ST - ZIP 3 PINE DRIVE
WOODBURY NY 11797-1509

TITLE ☐ DELETE

NAME SD
STREET ADDRESS KASIMOW, STEVEN
CITY - ST - ZIP 21405 N.E. 19TH COURT
MIAMI FL 33179

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/98

(954) 921-6300

Date

Daytime Phone # 0249427

CR2E034 (10/97)