PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000025651

WORLD UNIQUE, INC.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90028 022 ***150.00



Principal Place	of Business	Mailing Address	Mailing Address			7 1900/1901 (18 (618) 1911) 681() 061() 801() 801() 801() 801() 801() 801() 801() 801() 801() 801() 801() 801()
2478 A FIRST AVENUE		POST OFFICE BOX 1673				
FERNANDINA BEACH FL 32034		FERNANDINA BEACH FL 32035-1673				
					DO NOT WRITE IN THIS SPACE	
						3, Date Incorporated or Qualifed
						03/18/1998
2. Principal Pl	ace of Business	2a. Mailing Address 26 P.O. 80 X /6731	CERN	, Z	ch Fr.	4. FEI Number 59-35074/3 Applied For Not Applicable
21		_ ="\	, ren		17/ 3203	\$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5, Certificate of Status Desired Fee Required
22		City & State				
City & State	9	⊢ ′				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
23	Country	Zip	Countr	·		8. This corporation owes the current year Intangible
Zip			10 COUNT	,		Personal Property Tax.
24	9. Name and Address of Curren		101			10. Name and Address of New Registered Agent
	9. Name and Address of Curren	r Kegistered Agent	81	1 1	Name	To, Hallio alla Hallio di
SUCA	ARA, GAROON					
	A FIRST AVENUE		82	2 5	Street Addre	ess (P.O. Box Number is Not Acceptable)
	ANDINA BEACH FL 32034		83	3		
	W (1 1 2 1 2 1 2 1 2 1 2 2 2 2 2 2 2 2 2		"	_		
			84	4 (City	EL 85 Zip Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at office or registered agent, or both, in the State of Florida. Such change was authorized 				ve-n	named corpo	oration submits this statement for the nurrose of changing its registered
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autitions of, Section 607.0505, Florid	nonzeu by ia Statute	y≀nı es.	e corporation	on a board of directors. Thereby accept the appointment as registered
-	,					
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: F	Registered Age	ent si	ignature required	d when reinstating) DATE
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1,1 TITLE			☐ Change ☐ Addition
NAME	SUCARA, GAROON		1.2 NAME			
STREET ADDRESS	ADDRESS 2478 A FIRST AVENUE		13 STREET ADDRESS		DDRESS	
CITY-ST-ZIP	FERNANDINA BEACH FL 32034 1		1.4 CITY-	1.4 CITY- ST- ZIP		
Π'nE	D	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	GANT, DONALD R		2.2 NAME		ł	
STREET ADDRESS	P.O.B. 83 N/A		2.3 STREE	ET AL	DDRESS	Ì
CITY-ST-ZIP NEW VERNON NJ 07976			2.4 CITY	-\$T-Z	ZIP	
TITLE		☐ DELETE 3.1				☐ Change ☐ Addition
NAME	3.2		3.2 NAME			
STREET ADDRESS			3 3 STREE	ETAL	DDRESS	
CITY-ST-ZIP			3.4. CiTY-ST-ZiP		ZIP _	
TITLE	☐ DELETE		4,1 TITLE			☐ Change ☐ Addition
NAME	4.		4. 2 NAME	4.2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		DORESS	
CITY-ST-ZIP			4.4 CITY-	ST-Z	ZIP	
TITLE		☐ DELETE	5.1 TITLE			· Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREI	ETAI	DDRESS	
CITY-ST-ZIP			5.4 CITY-	ST-Z	ZIP	}
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME	Ξ		
STREET ADDRESS			63 STREE	ET AC	DDRESS	
SINCE MUDRESS			64 CITY			

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, with all other like empowered.

- GAROON SUCARA