

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000005395

1. Entity Name

UNIQUE THREE, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90088 029 ***150.00

Principal Place of Business

Mailing Address

2242 FOWLER ST.
FT. MYERS FL 33901

1500 COLONIAL BLVD., STE. 103
FT. MYERS FL 33907-1025

2. Principal Place of Business

2242 Fowler St.

3. Mailing Address

1500 COLONIAL BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE. 103

City & State

FT. MYERS FLA

City & State

FT. MYERS FLA

Zip

33901

Country

LEE

Zip

33907

Country

LEE

4. FEI Number

65-0910173

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILLIGAN, JOHN P JR
1500 COLONIAL BLVD., STE. 103
FT. MYERS FL 33907

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS MERZA, MICHAEL
CITY-ST-ZIP 2456 N. WESTWOOD DR.
N. FT. MYERS FL 33917

TITLE ☒ Delete
NAME D
STREET ADDRESS KUNFALVI, MARTON
CITY-ST-ZIP 2242 FOWLER ST.
FT. MYERS FL 33901

TITLE ☒ Delete
NAME D
STREET ADDRESS GABO-PETRANY, DEZCO
CITY-ST-ZIP 2456 V. WESTWOOD DR.
N. FT. MYERS FL 33907

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MICHAEL MERZA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-00

Date

941-337-4642

Daytime Phone #

CR2E034 (9/99)