

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000035521

1. Entity Name

UNIQUE BRIDAL, INC.

FILED

01 JAN -2 PM 3:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

865 S.E. 21ST AVE.  
DEERFIELD BEACH FL 33441

Mailing Address

865 S.E. 21ST AVE.  
DEERFIELD BEACH FL 33441-5158

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

03-14-2000 90046 046 1-18-00  
65-0913098

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARGYROPOULOS, DORA  
865 S.E. 21ST AVE.  
DEERFIELD BEACH FL 33441

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:

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	Delete
	D			<input type="checkbox"/>
	ARGYROPOULOS, DORA	865 S.E. 21ST AVE.	DEERFIELD BEACH FL 33441	
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

**Howitt & Associates**

441 S State Road 7  
Suite 15  
Margate, FL 33068  
Tel 954-984-1600  
Fax 954-984-1886

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December 27, 2000

Division of Corporations  
P O Box 1500  
Tallahassee, FL 32302-1500

Re: Unique Bridal Inc.  
P99000035521  
65-0913098

Dear Sir,

Enclosed you will find the annual form for the year 2000. Your office had sent a second notice to my client. I am enclosing a copy from the bank of my client's check number 756, which was sent in with the first notice. You can see it was sent timely.

Please check your records accordingly and reinstate my client's corporation.

Thank you for your assistance.

Sincerely,



Stuart Howitt