


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2005 08:00 AM
Secretary of State

DOCUMENT # V19482 1. Entity Name UNICORN ASSET MANAGEMENT, INC.	
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Principal Place of Business 6020 5TH STREET S.W. VERO BEACH, FL 32968	Mailing Address 6020 5TH STREET S.W. VERO BEACH, FL 32968
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02102005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3115469	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent KAHLE, GEORGE A JR. 6020 FIFTH STREET SOUTHWEST VERO BEACH, FL 32968

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSDT KAHLE, GEORGE A. JR. 6020 FIFTH STREET SOUTHWEST VERO BEACH, FL
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02/28/05-80024-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: George A. Kahle 2-23-05 772-778-2224
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #