

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004089

FILED  
Feb 05, 2008  
Secretary of State

Entity Name: ASOCIACION UNIDAD CRISTIANA UNIVERSITARIA "UCU", INC.

**Current Principal Place of Business:**

CRA 28N 46-06  
BOGOTA, DC COLOMBIA XX

**New Principal Place of Business:**

CRA 28N 46-06  
BOGOTA, DC COLOMBIA

**Current Mailing Address:**

P.O. BOX 52-7900  
MIAMI, FL 331527900

**New Mailing Address:**

FEI Number: 98-0463681      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEMARCO, MIGUEL A  
5465 NW 36TH STREET  
MIAMI, FL 33166 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ACOSTA, ALFONSO  
Address: CALLE 146A N 93-10 CASA3  
City-St-Zip: BOGOTA, DC COLOMBIA XX

Title: V ( ) Delete  
Name: GUTIERREZ, GUILLERMO  
Address: CARRERA 103D NO. 86-55 CASA 126  
City-St-Zip: BOGOTA, DC COLOMBIA XX

Title: S ( ) Delete  
Name: CRUZ, GIOVANNY  
Address: DIAGONAL 22 B N 38-76 BLOQUE B-5 APTO 1205  
City-St-Zip: BOGOTA, DC COLOMBIA XX

Title: T ( ) Delete  
Name: GARZON DE HERRERA, SONIA  
Address: DIAGONAL 31 N 37-92  
City-St-Zip: BOGOTA, DC COLOMBIA XX

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SONIA GARZON

T

02/05/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date