2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000106658

Entity Name: UNA COMPLETA, INC

FILED Mar 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

360 SE 1ST STREET 360 SE 1ST STREET MIAMI, FL 33130 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

360 SE 1ST STREET 360 SE 1ST STREET MIAMI, FL 33130 MIAMI, FL 33131

FEI Number: 26-3834757 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BENSOUSSAN, LAURENT BENSOUSSAN, LAURENT D
11710 SW 80TH ROAD 11710 SW 80TH ROAD
PINECREST, FL 33156 US PINECREST, FL 33156 US

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: LAURENT D. BENSOUSSAN 03/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGRM () Delete Title: **PRFS** (X) Change () Addition Name: BENSOUSSAN, LAURENT Name: BENSOUSSAN, LAURENT 11710 SW 80TH ROAD 11710 SW 80TH ROAD Address: Address: City-St-Zip: PINECREST, FL 33156 City-St-Zip: PINECREST, FL 33156

Title: MGRM () Delete Title: VP (X) Change () Addition Name: BENSOUSSAN, PETRA BENSOUSSAN, PETRA

Name:BENSOUSSAN, PETRAName:BENSOUSSAN, PETRAAddress:11710 SW 80TH ROADAddress:11710 SW 80TH ROADCity-St-Zip:PINECREST, FL 33156City-St-Zip:PINECREST, FL 33156

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 FONTANA, PHILIPPE
 Name:

 Address:
 5887 SW 28TH STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33155
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 FONTANA, GLÓRIA
 Name:

 Address:
 5887 SW 28TH STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33155
 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURENT D. BENSOUSSAN PRES 03/05/2009