

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000006623

**Entity Name:** UNITY LATINOAMERICANO, INC.

**Current Principal Place of Business:**

10838 NW 27 ST.  
DORAL, FL 33172

**Current Mailing Address:**

10838 NW 27 ST.  
DORAL, FL 33172

**FEI Number: 01-0594102**

**Certificate of Status Desired: No**

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

CORALES, MIGUEL  
10838 NW 27 ST  
DORAL, FL 33172 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:**

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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VOCAL  
Name ZAMORA , RINA  
Address 10441 SW 127 CT.  
City-State-Zip: MIAMI FL 33186

Title VOCAL  
Name GARCIA, RAMONA  
Address 10441 SW 155 CT. APT. 921  
City-State-Zip: MIAMI FL 33196

Title VP  
Name SAAVEDRA, JHACSON  
Address 15896 SW 55 TERR  
City-State-Zip: MIAMI FL 33185

Title PRESIDENT  
Name BARSALLO, SILVIA  
Address 14321 SW 62 ST.  
City-State-Zip: MIAMI FL 33183

Title D  
Name CORALES, MIGUEL P  
Address 4858 NW 108 CT  
City-State-Zip: DORAL FL 33178

Title TREASURER  
Name PARRA, JORGE M  
Address 4315 FOXTAIL LANE  
City-State-Zip: WESTON, FL. FL 33331

Title SECRETARY  
Name ZAYAS, MYRIAM  
Address 11735 SW 119 PL. RD.  
City-State-Zip: MIAMI FL 33186

*I hereby 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 all other like empowered.*

**SIGNATURE: MIGUEL CORALES**

**DIRECTOR**

**01/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date