

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000050697

**Entity Name:** UND, US NETWORK DIRECT, CORP

**FILED**  
**Feb 02, 2013**  
**Secretary of State**  
**CC6225271550**

**Current Principal Place of Business:**

8181 NW 36TH ST  
SUITE 16 B  
DORAL, FL 33166

**Current Mailing Address:**

8181 NW 36TH ST  
SUITE 16 B  
DORAL, FL 33166

**FEI Number: 65-1110723**

**Certificate of Status Desired: No**

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

PREMIER CONSULTING AND BUSINESS SERVICES  
9950 SW 8TH ST  
SUITE 206  
MIAMI, FL 33174 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           CEO  
Name           ANTONIO, BRITO ENG  
Address       8181 NW 36TH ST SUITE 16 B  
City-State-Zip: DORAL FL 33166

Title           VP  
Name           FUENTES, FEDERICO LENG  
Address       8181 NW 36 ST SUITE 16B  
City-State-Zip: DORAL FL 33166

Title           CFO  
Name           PORTILLO, MANUEL SR  
Address       8181 NW 36 ST SUITE 16B  
City-State-Zip: DORAL FL 33029

Title           VP  
Name           SCHMIDT, CAMILO SR  
Address       8181 NW 36 ST., STE 16B  
City-State-Zip: DORAL FL 33166

Title           VP OPERATIONS  
Name           BUSTAMANTE, ALI  
Address       8181 NW 36 ST  
                  SUITE 16B  
City-State-Zip: DORAL FL 33166

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ANTONIO BRITO**

**CEO**

**02/02/2013**

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

\_\_\_\_\_  
Date