

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000006352

**FILED**  
**Apr 25, 2024**  
**Secretary of State**  
**1813859974CC**

**Entity Name:** UNIMAS NETWORK (INC.)

**Current Principal Place of Business:**

9405 NW 41ST STREET  
DORAL, FL 33178

**Current Mailing Address:**

9405 NW 41ST STREET  
DORAL, FL 33178 US

**FEI Number:** 48-1284839

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CHIEF TAX OFFICER  
Name WOHN, ALICE  
Address 9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

Title ASSISTANT SECRETARY  
Name RODRIGUEZ, VERONICA  
Address 9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

Title CHIEF ACCOUNTING OFFICER  
Name LARA DEL OLMO, JOSE ANTONIO  
Address 9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

Title DIRECTOR  
Name FERREIRO, CARLOS  
Address 9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

Title DIRECTOR  
Name RAMOS, PILAR  
Address 9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

Title CEO  
Name DAVIS, WADE  
Address 9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

Title PRESIDENT  
Name GAZZOLO, PIERLUIGI  
Address 9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

Title CFO  
Name FERREIRO, CARLOS  
Address 9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

**Continues on page 2**

*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:** PIERLUIGI GAZZOLO

**PRESIDENT**

**04/25/2024**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            GENERAL COUNSEL & SECRETARY  
Name            RAMOS, PILAR  
Address        9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178

Title            CHIEF ADMINISTRATIVE OFFICER  
Name            TOMAS, JOSE  
Address        9405 NW 41ST STREET  
City-State-Zip: DORAL FL 33178