

**2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737862

**FILED**  
**Jan 14, 2010**  
**Secretary of State**

**Entity Name:** UNIDAD/ONENESS, CENTER OF TRUTH, INC.

**Current Principal Place of Business:**

9 KNOTWOOD LN  
HOMOSASSA, FL 34446

**New Principal Place of Business:**

**Current Mailing Address:**

9 KNOTWOOD LN  
HOMOSASSA, FL 34446

**New Mailing Address:**

**FEI Number:** 59-1796990      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CINA, NORA A REV.  
9 KNOTWOOD LN  
HOMOSASSA, FL 34446      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:** PD  
**Name:** CINA, NORA REV.  
**Address:** 9 KNOTWOOD LN  
**City-St-Zip:** HOMOSASSA, FL 34446

**Title:** VD  
**Name:** LEVINS, RUTH  
**Address:** 3930 N. SEMINOLE PT  
**City-St-Zip:** CRYSTAL RIVER, FL 34428

**Title:** D  
**Name:** CINA, SALVATORE  
**Address:** 9 KNOTWOOD LN  
**City-St-Zip:** HOMOSASSA, FL 34446

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: NORA CINA

PD

01/14/2010

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

\_\_\_\_\_  
Date