

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000001897

Entity Name: UNICOM, LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

677 SW 111TH. AVENUE
SUITE 201
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

677 SW 111TH. AVENUE
SUITE 201
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 03-0380081 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DE LA HOZ, JORGE E
304 PALERMO AVENUE
CORAL GABLES, FL 33134 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GODINHO, HENIO J
Address: 677 SW 111TH. AVENUE - SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33025

Title: MGR () Delete
Name: PLENTZ, JEFFERSON A
Address: 677 SW 111TH. AVENUE - SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33025

Title: MGR () Delete
Name: MAGNANI, DECIO
Address: 677 SW 111TH. AVENUE - SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33025

Title: MGR () Delete
Name: MOSQUERA, CARLOS J
Address: 677 SW 111TH. AVENUE - SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33025

Title: MGR (X) Delete
Name: MENDOZA, LUIS CARLOS
Address: 677 SW 111TH. AVENUE - SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: HENIO GODINHO

MGRM

05/01/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date