

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006928

Entity Name: UNIGROUP, LLC

FILED  
Mar 03, 2008  
Secretary of State

## Current Principal Place of Business:

1730 MAIN STREET  
#228  
WESTON, FL 33326 US

## Current Mailing Address:

318 INDIAN TRACE  
#271  
WESTON, FL 33326 US

## New Principal Place of Business:

318 INDIAN TRACE  
# 271  
WESTON, FL 33326 US

## New Mailing Address:

FEI Number: 20-2242502      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GAJARDO, NADIA A  
2564 JARDIN CT  
WESTON, FL 33327 US

## Name and Address of New Registered Agent:

GAJARDO, NADIA A  
2554 CORDOBA BEND  
WESTON, FL 33327 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: NADIA GAJARDO

03/03/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: GAJARDO, NADIA A  
Address: 2564 JARDIN CT  
City-St-Zip: WESTON, FL 33327 US

Title: MGR ( ) Delete  
Name: VILLABLANCA, NORMA A  
Address: 318 INDIAN TRACE #271  
City-St-Zip: WESTON, FL 33326 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: GAJARDO, NADIA A  
Address: 2554 CORDOBA BEND  
City-St-Zip: WESTON, FL 33327 US

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: NADIA GAJARDO

MRS

03/03/2008

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