

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 17, 2010**  
**Secretary of State**

DOCUMENT# N00000004858

**Entity Name:** UNAD FLORIDA, INC.**Current Principal Place of Business:**2800 WESTON RD  
SUITE 203  
WESTON, FL 33331**New Principal Place of Business:****Current Mailing Address:**2800 WESTON RD  
SUITE 203  
WESTON, FL 33331**New Mailing Address:****FEI Number:** 65-1059288**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**MERKIN, STEWART A ESQ  
444 BRICKELL AVE. S#300, RIVERGATE PLAZA  
MIAMI, FL 33131 US**Name and Address of New Registered Agent:**CORRIGAN, JOHN ESQ  
444 BRICKELL AVE. RIVERGATE PLAZA  
300  
MIAMI, FL 33131 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: JOHN CORRIGAN

05/17/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:**

Title: DR.  
Name: LEAL, JAIME CHAIR  
Address: 1820 N. CORPORATE LAKES BLVD OFFICE 203  
City-St-Zip: WESTON, FL 33326

Title: VC  
Name: CORRIGAN, JOHN VICE-CH  
Address: 1820 N. CORPORATE LAKES BLVD OFFICE 203  
City-St-Zip: WESTON, FL 33326

Title: D  
Name: MICHELSEN, ALEJANDRO  
Address: 1820 N. CORPORATE LAKES BLVD OFFICE 203  
City-St-Zip: WESTON, FL 33326

Title: D  
Name: SORRELS, IRINA  
Address: 1820 N. CORPORATE LAKES BLVD OFFICE 203  
City-St-Zip: WESTON, FL 33326

Title: D  
Name: RUTTER, KATHERINE  
Address: 1820 N. CORPORATE LAKES BLVD OFFICE 203  
City-St-Zip: WESTON, FL 33326

Title: D  
Name: PINZON, MAGDALENA  
Address: 1820 N. CORPORATE LAKES BLVD OFFICE 203  
City-St-Zip: WESTON, FL 33326

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: JAIME LEAL, CHAIRMAN OF THE BOARD

DR.

05/17/2010

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