

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006489

FILED
Sep 01, 2006
Secretary of State

Entity Name: UNIKA MASTER ASSOCIATION, INC.

Current Principal Place of Business:

232 ANDALUSIA AVENUE
SUITE 370
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

232 ANDALUSIA AVENUE
SUITE 370
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-2934421 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SHEAR, DAVID
201 ALHAMBRA CIRCLE
SUITE 601
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ESPINOSA, PATRICIA O
232 ANDALUSIA AVE
SUITE 370
CORAL GABLES, FL 33134 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: PATRICIA O. ESPINOSA, ESQ.

09/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: PINO, HENRY
Address: 232 ANDALUSIA AVENUE #370
City-St-Zip: CORAL GABLES, FL 33134

Title: VD () Delete
Name: VELAR, MANUEL
Address: 232 ANDALUSIA AVENUE #370
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: JENSEN, PAMELA
Address: 232 ANDALUSIA AVENUE #370
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: RAMOS, JACKY
Address: 232 ANDALUSIA AVENUE #370
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HENRY PINO

PSTD

09/01/2006

Electronic Signature of Signing Officer or Director

Date