

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003115

FILED
Jun 19, 2008
Secretary of State

Entity Name: UNITY COMPLIANCE & SERVICES, INC.

Current Principal Place of Business:

1226 NW 31ST WAY
LAUDERHILL, FL 33311

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 121644
FT. LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 11-3814481 **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:

SMITH, WARENCE M
951 NW 33RD WAY
LAUDERHILL, FL 33311 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 () Delete
Name: HOME, LIVIA A
Address: 1226 NW 31ST WAY
City-St-Zip: LAUDERHILL, FL 33311

Title: VT () Delete
Name: SMITH, WARENCE M
Address: 1226 NW 31ST WAY
City-St-Zip: LAUDERHILL, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: WARENCE MAE SMITH

VP

06/19/2008

Electronic Signature of Signing Officer or Director

Date