2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000006124

Entity Name: UNITY FOUNDATION INC

FILED Oct 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6814 SW 102 AVE MIAMI, FL 33173 US

Current Mailing Address: New Mailing Address:

PO BOX 226884

MIAMI, FL 33122 US

FEI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent:

PB&A FINANCIAL SERVICES CORP 174 NE 96 ST MIAMI, FL 33138 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: SANDRA PEREZ

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: LABRA, CARLOS Name:

 Name:
 LABRA, CARLOS
 Name:

 Address:
 1844 NW 82 AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33126 US
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 RAMIREZ, MANUEL
 Name:

 Address:
 8108 SW 86 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33143 US
 City-St-Zip:

Title: SEC () Delete Title: () Change () Addition

 Name:
 PENTON, MIGUEL
 Name:

 Address:
 3202 SW 153 PLACE
 Address:

 City-St-Zip:
 MIAMI, FL 33185 US
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 PELLEGRINI, SANTIAGO
 Name:

 Address:
 1839 SW 27TH AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33145 US
 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: CARLOS LABRA P 10/28/2008