

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000077533

Entity Name: UNIDES, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

1795 NE 164TH STREET
NORTH MIAMI BEACH, FL 33162 US

New Principal Place of Business:

Current Mailing Address:

1795 NE 164TH STREET
NORTH MIAMI BEACH, FL 33162 US

New Mailing Address:

FEI Number: 65-0864740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, RICARDO
16485 COLLINS AVE - 1932
SUNNY ISLES, FL 33160 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GONZALEZ, RICARDO MR
Address: 16485 COLLINS AVENUE, APT. 1932
City-St-Zip: SUNNY ISLES, FL 33160

Title: D () Delete
Name: MERCADO, JOSE A DR
Address: 3172 RIDGE TRACE
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: VALCIN, FRANKLIN DR
Address: 14641 SOUTH SPUR DRIVE
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Delete
Name: GACHETTE, ERICA MRS
Address: 468 NE 206TH LANE · 210
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: /RICARDO GONZALEZ/

RA

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date