

Station 89

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor Notes
2-1	Lump Sum Cost for Fiber Installation - Fire Station 89 to Pines Art Center	1	Lump Sum	\$56,079.62	\$56,079.62	
	Total				\$56,079.62	

Fire Station 79

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor Notes
1-1	Lump Sum Cost for Fiber Installation - Fire Station 79 to Soccer Park	1	Lump Sum	\$50,862.99	\$50,862.99	
	Total				\$50,862.99	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/19/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER RSC Insurance Brokerage, Inc. 9350 S Dixie Hwy Suite 1400 Miami FL 33156	CONTACT NAME: Yoly Iglesias PHONE (A/C, No, Ext): (305) 446-2271 E-MAIL ADDRESS: yiglesias@risk-strategies.com FAX (A/C, No):
INSURED Unitec, Inc., DBA: Unitec 480 W 83rd Street Hialeah FL 33014	INSURER(S) AFFORDING COVERAGE INSURER A: Monroe Guaranty Ins Co INSURER B: Progressive Insurance Company INSURER C: HDI Specialty Insurance Co INSURER D: FCCI Insurance Co INSURER E: INSURER F:
	NAIC # 32506 11410 16131 10178

COVERAGES**CERTIFICATE NUMBER:** CL258684652**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PRO-JECT ☐ LOC OTHER:	Y	Y	GL100027467-08	08/08/2025	08/08/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Employee Benefits \$ 1,000,000
B	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☒ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY	Y	Y	985062935	08/08/2025	08/08/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	☒ UMBRELLA LIAB ☐ EXCESS LIAB DED ☒ RETENTION \$ 0			CLXD7001301S	08/08/2024	09/08/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	WC0100059268-05	08/08/2025	08/08/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Pembroke Pines is included as Additional Insured for General Liability and Auto Liability. Waiver of Subrogation in favor of the Additional Insured applies to General Liability, Auto Liability and Workers Compensation as required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

City of Pembroke Pines 8300 South Palm Drive Pembroke Pines FL 33025	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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Proposer's Background Information Form

#	Question	Response	Comment	Status
Contact Information				
1.1.1	Primary Contact: Please provide the contact information (Name, Title, E-mail and Phone Number) for the Primary Contact for this project.	Lesile Gonzalez, Business Manager, lgonzalez@unitecus.co m, & (305) 947-5226 EXT. 102		Complete
1.1.2	Authorized Approver: Please provide the contact information (Name, Title, E-mail and Phone Number) for the Authorized Approver for this project.	Katiuska Hurles, General Manager, khurles@unitecus.com, & (305) 947-5226 EXT. 101		Complete
Organization Background				
1.2.1	Please state the year that you company started its business.	March 11th, 1998		Complete
1.2.2	Please state the year that your company started providing service under your current business name.	April 15th, 2014		Complete
1.2.3	What State is your Company Registered In?	Florida		Complete
Former Business				
1.3.1	Under what former name has your business operated? Include a description of the business.	Atlantic Coast Cable Communications Inc.	Similar to now named Unitec Inc, Atlantic Coast Cable Communications Inc. was a low-voltage cabling contractor specializing in fiber optics, structured cabling, and network infrastructure, with experience servicing in schools, cities, counties, and commercial clients	Complete
1.3.2	At what address was that business located?	14250 NE 18th Ave, North Miami, FL 33181		Complete
Past Failure				
1.4.1	Have you ever failed to complete work awarded to you. If so, when, where and why?	No		Complete
Inspected				
1.5.1	Have you personally inspected the proposed WORK and do you have a complete plan for its performance?	Yes		Complete
Subcontracting				
1.6.1	Will you subcontract any part of this WORK? If you will be subcontracting any part of this work, provide details including a list of each sub-contractor(s) that will perform work in excess of ten percent (10%) of the contract amount and the work that will be performed by each subcontractor(s). (Note: The proposed list of subcontractor(s) may not be amended after award of the contract without the prior written approval of the Contract Administrator, whose approval shall not be reasonably withheld.)	No		Complete
Bankruptcy Petitions				
1.7.1	List and describe all bankruptcy petitions (voluntary or involuntary) which have been filed by or against the Proposer, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition.	N/A		Complete
Bond Claims				
1.8.1	List and describe all successful Bond claims made to your surety(ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Proposer and its predecessor organization(s).	N/A		Complete
Claims, Arbitrations, Administrative Hearings and Lawsuits				

1.9.1	List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Proposer or its predecessor organizations(s) during the last (10) years. The list shall include all case names; case, arbitration or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute.	MIAMI-DADE COUNTY vs UNITEC, INC. Local Case Number: 2025-083594-CC-05 Filing Date: 05/12/2025 Explanation: Miami-Dade County filed a lawsuit for damages to its utilities. Unitec's insurance declined to settle the claim, arguing the damage was caused by other construction companies in the area that failed to request utility locates before beginning work.	Oghenerhoro Bamawo vs Norberto Gonzalez Guzman et al Local Case Number: 2025-000884-CA-01 Filing Date: 01/20/2025 Explanation: This case involves an auto accident where our driver sideswiped a stationary County bus. A passenger on the bus is claiming excessive damages. Unitec's insurance company chose to contest the claim in court. Carlos Humberto Carrera Soares vs Atlantic Broadband LLC et al Local Case Number: 2021-020536-CA-01 Filing Date: 09/03/2021 Explanation: The plaintiff allegedly fell into a hole in the pavement near an active construction zone and sued both Atlantic Broadband and Unitec. However, the hole was not related to our work—our permits had been properly closed and inspected months earlier. The case was dismissed. Fabiola Pascal-Clavel de Los Angeles vs Unitec, Inc. et al Local Case Number: 2021-013504-CA-01 Filing Date: 06/10/2021 State Case Number: 132021CA013504000001 Explanation: Auto accident involving a pedestrian. The insurance company settled the case. The pedestrian was not crossing at an intersection and was pushing a shopping cart, which became entangled with the front wheels of the Unitec truck.	Complete
Criminal Proceedings or Hearings				
1.10.1	List and describe all criminal proceedings or hearings concerning business related offenses in which the Proposer, its principals or officers or predecessor organization(s) were defendants.	N/A		Complete
Company Classification				
1.11.1	In regards to the commodities/services proposed, which of the following best classifies your firm? If you selected any options besides \"Original Provider\" please explain.	Original Provider		Complete
Debarment/Suspension				
1.12.1	Have you ever been debarred or suspended from doing business with any governmental agency? If you have been debarred or suspended from doing business with any governmental agency, please explain.	No		Complete
Similar Experience & Contracts				
1.13.1	Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.		Unitec Inc. has a proven record of delivering telecommunications and low-voltage infrastructure projects throughout Florida that are similar in size and complexity to this contract. Our responsibilities have included the full scope of design, installation, splicing, termination, and testing of fiber optic systems; deployment of structured cabling and network infrastructure; and integration of low-voltage systems such as security cameras, access control, and Wi-Fi networks. In recent years, Unitec has successfully serviced schools, municipalities, counties, and commercial clients completing E-Rate funded projects for Miami-Dade County Public Schools, fiber, directional bore, missile bore, and Wi-Fi upgrades for various cities, and structured cabling installations at military and higher education facilities. This experience demonstrates our ability to manage large-scale, compliance-driven projects while meeting the schedule, budget, and performance expectations of our clients.	Complete
Professional License Information				
1.14.1	Are professional licenses required to perform the services requested in this solicitation? If so, please list any applicable professional licenses that your company has that are required to provide these services.	Applicable	License Numbers: CGC1527259 (General Contractor) ES12001883 (Low Voltage Contractor) CUC1224567 (Underground Utility & Excavation Contractor) ES12001847 (Low Voltage Contractor) EC13010211 (Electrical Contractor)	Complete
Conflict of Interest				
1.15.1	Do you need to disclose any conflicts of interest? The award of any contract hereunder is subject to the provisions of Chapter 112, Florida Statutes. Proposers must disclose with their Proposal the name of any officer, director, partner, proprietor, associate or agent who is also an officer or employee of CITY or any of its agencies. Further, all Proposers must disclose the name of any officer or employee of CITY who owns, directly or indirectly, an interest of five percent (5%) or more in the Proposer 's firm or any of its branches or affiliate companies.	No		Complete
19 Questions		100.00% Complete		



**SWORN STATEMENT
ON PUBLIC ENTITY CRIMES
UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a).**

1. This sworn statement is submitted Unitec Inc.
(name of entity submitting sworn statement) whose business address is
480 W 83rd St, Hialeah, FL 33014
and (if applicable) its Federal Employer Identification Number (FEIN) is
65-0817802. (If the entity has no FEIN, include the Social Security
Number of the individual signing this sworn statement: _____.)
2. My name is Katuska Hurles and my
(Please print name of individual signing)
relationship to the entity named above is Owner.
3. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid, proposal, reply, or contract for goods or services, any lease for real property, or any contract for the construction or repair of a public building or public work, involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
4. I understand that a "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
5. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
 1. A predecessor or successor of a person convicted of a public entity crime: or
 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The Cityship by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a



joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

6. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or any entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
7. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **(Please indicate which statement applies.)**
- ☒ A) Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.
- ☐ B) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND **(Please indicate which additional statement applies.)**
- ☐ B1) There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. **(Please attach a copy of the final order.)**
- ☐ B2) The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. **(Please attach a copy of the final order.)**
- ☐ B3) The person or affiliate has not been placed on the convicted vendor list. **(Please describe any action taken by or pending with the Department of General Services.)**

Katiuska Hurles 
Bidder's Name/Signature

Unitec Inc.
Company

09/03/2025
Date



EQUAL BENEFITS CERTIFICATION FORM FOR DOMESTIC PARTNERS AND ALL MARRIED COUPLES

Except where federal or state law mandates to the contrary, a Contractor awarded a Contract pursuant to a competitive solicitation shall provide benefits to Domestic Partners and spouses of its employees, irrespective of gender, on the same basis as it provides benefits to employees' spouses in traditional marriages.

The Contractor shall provide the City and/or the City Manager or his/her designee, access to its records for the purpose of audits and/or investigations to ascertain compliance with the provisions of this section, and upon request shall provide evidence that the Contractor is in compliance with the provisions of this section upon each new bid, contract renewal, or when the City Manager has received a complaint or has reason to believe the Contractor may not be in compliance with the provisions of this section. Records shall include but not be limited to providing the City and/or the City Manager or his/her designee with certified copies of the Contractor's records pertaining to its benefits policies and its employment policies and practices.

The Contractor must conspicuously make available to all employees and applicants for employment the following statement:

"During the performance of a contract with the City of Pembroke Pines, Florida, the Contractor will provide Equal Benefits to its employees with spouses, as defined by Section 35.39 of the City's Code of Ordinances, and its employees with Domestic Partners and all Married Couples".

The posted statement must also include a City contact telephone number and email address which will be provided to each contractor when a covered contract is executed.

SECTION 1 DEFINITIONS

1. **Benefits** means the following plan, program or policy provided or offered by a contractor to its employees as part of the employer's total compensation package which may include but is not limited to sick leave, bereavement leave, family medical leave, and health benefits.
2. **Cash Equivalent** mean the amount of money paid to an employee with a domestic partner or spouse in lieu of providing benefits to the employee's domestic partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee for his or her spouse from a traditional marriage.
3. **Covered Contract** means a contract between the City and a contractor awarded subsequent to the date when this section becomes effective valued at over \$25,000 or the threshold amount required for competitive bids as required in section 35.18(A) of the Procurement Code.
4. **Domestic Partner** shall mean any two (2) adults of the same or different sex who have registered as domestic partners with a governmental body pursuant to state or local law authorizing such registration, or with an internal registry maintained by the employer of at



least one of the domestic partners. A contractor may institute an internal registry to allow for the provision of equal benefits to employees with domestic partners who do not register their partnerships pursuant to a governmental body authorizing such registration, or who are located in a jurisdiction where no such governmental domestic partnership registry exists. A contractor that institutes such registry shall not impose criteria for registration that are more stringent than those required for domestic partnership registration by the City of Pembroke Pines.

5. **Equal benefits** means the equality of benefits between employees with spouses and/or dependents of spouses and employees with domestic partners and/or dependents of domestic partners, and/or between spouses of employees and/or dependents of spouses and domestic partners of employees and/or dependents of domestic partners.
6. **Spouse** means one member of a married pair legally married under the laws of any state within the United States of America or any other jurisdiction under which such marriage is legally recognized, irrespective of gender.
7. **Traditional marriage** means a marriage between one man and one woman.

SECTION 2 CERTIFICATION OF CONTRACTOR

The firm providing a response, by virtue of the signature below, certifies that it is aware of the requirements of Section 35.39 "City Contractors providing Equal Benefits for Domestic Partners and all Married Couples" of the City's Code of Ordinances, and certifies the following (**Check only one box below**):

- ☒ **A.** Contractor currently complies with the requirements of this section; or
- ☐ **B.** Contractor will comply with the conditions of this section at the time of contract award; or
- ☐ **C.** Contractor will not comply with the conditions of this section at the time of contract award:
or
- ☐ **D.** Contractor does not comply with the conditions of this section because of the following allowable exemption (**Check only one box below**):
- ☐ **1.** The Contractor does not provide benefits to employees' spouses in traditional marriages;
- ☐ **2.** The Contractor provides an employee the cash equivalent of benefits because the Contractor is unable to provide benefits to employees' Domestic Partners or spouses despite making reasonable efforts to provide them. To meet this exception, the Contractor shall provide a notarized affidavit that it has made reasonable efforts to provide such benefits. The affidavit shall state the efforts taken to provide such benefits and the amount of the cash equivalent. Cash equivalent means the amount of money paid to an employee with a Domestic Partner or spouse rather than providing benefits to the employee's Domestic Partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee's spouse;



☐ 3. The Contractor is a religious organization, association, society, or any non-profit charitable or educational institution or organization operated supervised or controlled by or in conjunction with a religious organization, association, or society;

☐ 4. The Contractor is a governmental agency;

The certification shall be signed by an authorized officer of the Contractor. Failure to provide such certification (by checking the appropriate boxes above along with completing the information below) shall result in a Contractor being deemed non-responsive.

COMPANY NAME: Unitec Inc.

AUTHORIZED OFFICER NAME / SIGNATURE: Katiuska Hurles [Signature]



VENDOR DRUG-FREE WORKPLACE CERTIFICATION FORM

SECTION 1 GENERAL TERM

Preference may be given to vendors submitting a certification with their bid/proposal certifying they have a drug-free workplace in accordance with Section 287.087, Florida Statutes. This requirement affects all public entities of the State and becomes effective January 1, 1991. The special condition is as follows:

IDENTICAL TIE BIDS - Preference may be given to businesses with drug-free workplace programs. Whenever two or more bids that are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drugfree workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after each conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

SECTION 2 AFFIRMATION

☒ Place a check mark here only if affirming bidder **complies fully** with the above requirements for a Drug-Free Workplace.

☐ Place a check mark here only if affirming bidder **does not** meet the requirements for a Drug-Free Workplace.

Failure to complete this certification at this time (by checking either of the boxes above) shall render the vendor ineligible for Drug-Free Workplace Preference. This form must be completed by/for the proposer; the proposer **WILL NOT** qualify for Drug-Free Workplace Preference based on their sub-contractors' qualifications.


Authorized Signature

Katuska Hurles
Authorized Signer Name

Unitec Inc.
Company Name



NON-COLLUSIVE AFFIDAVIT

BIDDER is the

Owner

(Owner, Partner, Officer, Representative or Agent)

BIDDER is fully informed respecting the preparation and contents of the attached Bid and of all pertinent circumstances respecting such Bid;

Such Bid is genuine and is not a collusive or sham Bid;

Neither the said BIDDER nor any of its officers, partners, owners, agents, representative, employees or parties in interest, including this affidavit, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other BIDDER, firm or person to submit a collusive or sham Bid in connection with the Contract for which the attached Bid has been submitted; or to refrain from bidding in connection with such Contract; or have in any manner, directly or indirectly, sought by agreement or collusion, or communications, or conference with any BIDDER, firm, or person to fix the price or prices in the attached Bid or any other BIDDER, or to fix any overhead, profit, or cost element of the Bid Price or the Bid Price of any other BIDDER, or to secure through any collusion conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed Contract;

The price of items quoted in the attached Bid are fair and proper and are not tainted by collusion, conspiracy, connivance, or unlawful agreement on the part of the BIDDER or any other of its agents, representatives, owners, employees or parties in interest, including this affidavit.

Printed Name/Signature

Katiuska Hurler / [Signature]

Title

General Manager

Name of Company

Unitec Inc.



**SCRUTINIZED COMPANY CERTIFICATION
PURSUANT TO FLORIDA STATUTE § 287.135.**

I, Katiuska Hurles/ General Manager, on behalf of Unitec Inc.,
Print Name and Title Company Name

certify that Unitec Inc. :
Company Name

1. Does not participate in a boycott of Israel; and
2. Is not on the Scrutinized Companies that Boycott Israel list; and
3. Is not on the Scrutinized Companies with Activities in Sudan List; and
4. Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; and
5. Has not engaged in business operations in Syria.

Submitting a false certification shall be deemed a material breach of contract. The City shall provide notice, in writing, to the Contractor of the City's determination concerning the false certification. The Contractor shall have ninety (90) days following receipt of the notice to respond in writing and demonstrate that the determination of false certification was made in error. If the Contractor does not demonstrate that the City's determination of false certification was made in error then the City shall have the right to terminate the contract and seek civil remedies pursuant to Florida Statute § 287.135.

Section 287.135, Florida Statutes, prohibits the City from: 1) Contracting with companies for goods or services in any amount if at the time of bidding on, submitting a proposal for, or entering into or renewing a contract if the company is on the Scrutinized Companies that Boycott Israel List, created pursuant to Section 215.4725, F.S. or is engaged in a boycott of Israel; and 2) Contracting with companies, for goods or services over \$1,000,000.00 that are on either the Scrutinized Companies with activities in the Iran Petroleum Energy Sector list, created pursuant to s. 215.473, or are engaged in business operations in Syria.

As the person authorized to sign on behalf of the Contractor, I hereby certify that the company identified above in the section entitled "Contractor Name" does not participate in any boycott of Israel, is not listed on the Scrutinized Companies that Boycott Israel List, is not listed on either the Scrutinized Companies with activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Syria. I understand that pursuant to section 287.135, Florida Statutes, the submission of a false certification may subject the company to civil penalties, attorney's fees, and/or costs. I further understand that any contract with the City for goods or services may be terminated at the option of the City if the company is found to have submitted a false certification or has been placed on the Scrutinized Companies with Activities in Sudan list or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List.

Unitec Inc.
Company Name

Katiuska Hurles/ [Signature] General Manager
Print Name / Signature Title



E-VERIFY SYSTEM CERTIFICATION STATEMENT (UNDER SECTION 448.095, FLORIDA STATUTES)

1. Definitions:

- a. **“Contractor”** means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration. “Contractor” includes, but is not limited to, a vendor or consultant.
- b. **“Subcontractor”** means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.
- c. **“E-Verify system”** means an Internet-based system operated by the United States Department of Homeland Security that allows participating employers to electronically verify the employment eligibility of newly hired employees.

2. Effective January 1, 2021, Contractors, shall register with and use the E-verify system in order to verify the work authorization status of all newly hired employees. Contractor shall register for and utilize the U.S. Department of Homeland Security’s E-Verify System to verify the employment eligibility of:

- a. All persons employed by a Contractor to perform employment duties within Florida during the term of the contract; and
- b. All persons (including subvendors/subconsultants/subcontractors) assigned by Contractor to perform work pursuant to the contract with the City of Pembroke Pines. The Contractor acknowledges and agrees that registration and use of the U.S. Department of Homeland Security’s E-Verify System during the term of the contract is a condition of the contract with the City of Pembroke Pines; and
- c. Should vendor become the successful Contractor awarded for the above-named project, by entering into the contract, the Contractor shall comply with the provisions of Section 448.095, Fla. Stat., “Employment Eligibility,” as amended from time to time. This includes, but is not limited to registration and utilization of the E-Verify System to verify the work authorization status of all newly hired employees. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract.

3. Contract Termination

- a. If the City has a good faith belief that a person or entity with which it is contracting has knowingly violated s. 448.09 (1) Fla. Stat., the contract shall be terminated.
- b. If the City has a good faith belief that a subcontractor knowingly violated s. 448.095 (2), but the Contractor otherwise complied with s. 448.095 (2) Fla. Stat., shall promptly notify the Contractor and order the Contractor to immediately terminate the contract with the subcontractor.
- c. A contract terminated under subparagraph a) or b) is not a breach of contract and may not be considered as such.
- d. Any challenge to termination under this provision must be filed in the Circuit Court no later than 20 calendar days after the date of termination.
- e. If the contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of 1 year after the date of termination.

COMPANY NAME: Unitec Inc.

PRINTED NAME / AUTHORIZED SIGNATURE: Katiuska Hurles / 



AFFIDAVIT OF COMPLIANCE WITH HUMAN TRAFFICKING LAWS

In accordance with section 787.06 (13), Florida Statutes, the undersigned, on behalf of the entity listed below ("Entity"), hereby attests under penalty of perjury that:

1. The Affiant is an officer or representative of the Entity entering into an agreement with the City of Pembroke Pines.
2. The Entity does not use coercion for labor or services as defined in Section 787.06, Florida Statutes, entitled "Human Trafficking".
3. The Affiant is authorized to execute this Affidavit on behalf of the Entity.
4. I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.
5. Pursuant to Sec. 92.525(2), Fla. Stat., under penalties of perjury, I declare that I have read the foregoing affidavit of compliance with Human Trafficking Laws and that the facts stated in it are true.

FURTHER AFFIANT SAYETH NAUGHT.

DATE: 09/03/2025

ENTITY: Unitec Inc.

SIGNATURE: 

NAME: Katiuska Hurles

TITLE: General Manager

**VENDOR INFORMATION FORM**

MAIN CONTACT INFORMATION			
Company Name (Legal Name as filed with IRS)	Unitec Inc.		
Doing Business As (DBA)	Unitec		
Primary Business Address	480 W 83rd St, Hialeah, FL 33014		
	City:	Hialeah	
	State:	Florida	Zip: 33014
	Country:	United States of America	
Remit To Address	480 W 83rd St, Hialeah, FL 33014		
	City:	Hialeah	
	State:	Florida	Zip: 33014
	Country:	United States of America	
Order From Address	480 W 83rd St, Hialeah, FL 33014		
	City:	Hialeah	
	State:	Florida	Zip: 33014
	Country:	United States of America	
Foreign Entity (Yes/No)	No		
Telephone Number	(305) 947-5226		
Primary Company E-mail	khurles@unitecus.com		
Fax	(305) 947-9307		
Website	www.unitecus.com		
DUNS	#015732732		
Independent Contractor (Yes/No)	Yes		
Identification Number	SSN:	N/A	FID: 65-0817802

GENERAL PAYMENT TERMS		
Discount Percent Defines the discount percentage the vendor extends to your organization.	Days to Discount Number of days which payment must be received to claim the discount percent.	Days to Net Number of days that the vendor allows before requiring net payment.
0%	0 Days	30 Days

CONTACT # 1	
Contact Name (First & Last Name)	Lesile Gonzalez
Description/Title/Position	Business Manager
Phone (Voice)	(305) 947-5226 EXT. 102
Phone (Text)	(786) 208-5128 Opt In (Y/N): Y
Fax	(305) 947-9307
E-mail	lgonzalez@unitecus.com

STATE REGISTRATION	
Is your company registered with the State of Florida? (Y/N)	Y
If not, what state is your company registered in?	

Please attach the print out from <https://dos.myflorida.com/sunbiz/> or the appropriate state showing your active registration and any applicable fictitious names that are registered.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type.
See Specific Instructions on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Unitec Inc.	
2 Business name/disregarded entity name, if different from above. Unitec	
3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☐ C corporation ☒ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☐ Other (see instructions) _____	
3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ ☐	
5 Address (number, street, and apt. or suite no.). See instructions. 480 W 83rd St	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
6 City, state, and ZIP code Hialeah, FL 33014	
7 List account number(s) here (optional)	

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-						
or									
Employer identification number									
6	5	-	0	8	1	7	8	0	2

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of
U.S. person

Date

09/03/2025

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023322

Entity Name: UNITEC INC.

Current Principal Place of Business:

480 W 83RD STREET
HIALEAH, FL 33014

Current Mailing Address:

480 W 83RD STREET
HIALEAH, FL 33014 US

FEI Number: 65-0817802

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HURLES, KATIUSKA
480 W 83RD STREET
HIALEAH, FL 33014 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: KATIUSKA HURLES

01/21/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name ESCORCIA, JORGE
Address 5061 SW 141 AVE
City-State-Zip: MIAMI FL 33175

Title PRESIDENT
Name HURLES, KATIUSKA
Address 11401 KNOTWAY
City-State-Zip: COOPER CITY FL 33026

Title SECRETARY
Name LESLIE, GONZALEZ
Address 16076 SW 154TH COURT
City-State-Zip: MIAMI FL 33187

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

SIGNATURE: KATIUSKA HURLES

PRESIDENT

01/21/2025

Electronic Signature of Signing Officer/Director Detail

Date

State of Florida

Department of State

I certify from the records of this office that UNITEC INC. is a corporation organized under the laws of the State of Florida, filed on March 11, 1998.

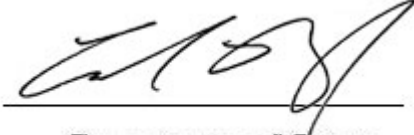
The document number of this corporation is P98000023322.

I further certify that said corporation has paid all fees due this office through December 31, 2025, that its most recent annual report/uniform business report was filed on January 21, 2025, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Twenty-first day of January,
2025*




Secretary of State

Tracking Number: 1702552174CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

THE UNDERGROUND UTILITY & EXCAVATION CO HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

HURLES, KATIUSKA

UNITEC
480 W. 83RD STREET
HIALEAH FL 33014

LICENSE NUMBER: CUC1224567

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 06/13/2024

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.





Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

HURLES, KATIUSKA

UNITEC
480 W. 83RD STREET
HIALEAH FL 33014

LICENSE NUMBER: CGC1527259

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 06/13/2024

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Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECTRICAL CONTRACTORS' LICENSING BOARD

THE SPECIALTY ELECTRICAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

AS A LIMITED ENERGY SYSTEMS SPECIALIST

BALMASEDA, JOEL

UNITEC
480 W. 83RD STREET
HIALEAH FL 33014

LICENSE NUMBER: ES12001847

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at [MyFloridaLicense.com](https://myfloridalicense.com)

ISSUED: 07/29/2024

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Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECTRICAL CONTRACTORS' LICENSING BOARD

THE SPECIALTY ELECTRICAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

AS A LIMITED ENERGY SYSTEMS SPECIALIST

ESCORCIA, JORGE LUIS

UNITEC
480 W. 83RD STREET
HIALEAH FL 33014

LICENSE NUMBER: ES12001883

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 07/27/2024

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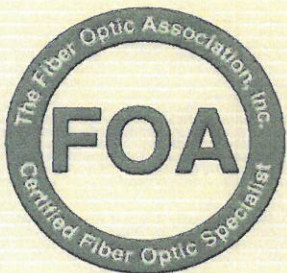


Certified Fiber Optic Technician

JOEL BALMASTEDA

has fulfilled the requirements of the
Fiber Optic Association (FOA), Inc. to become a
Certified Fiber Optic Technician (CFOT)

BDI DataLynk, Certified Fiber Optics Technician Course
24 Classroom Hours (Actual hours may vary depending on number of students.)




Instructor Signature

5/6/2015
Date

2084444
CFOT #

5/8/2015
Date

BICSI Approved CECs:
24 ITS
Event ID:
OV-BDI-TX-0813-1



Javier Parera

Has achieved certification from the Fiber Optic Association

Number And Certification

04080002 CFOT

Issue Date

06/15/2021

Expiration Date

06/15/2027

Badge Online



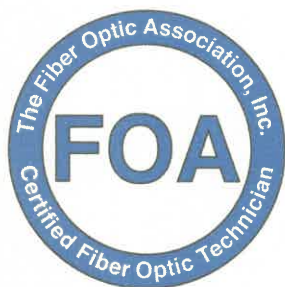
The Fiber Optic Association Inc.
the international professional association of fiber optics

Certified Fiber Optic Technician

Walfrido J Maulini

has fulfilled the requirements of
The Fiber Optic Association (FOA), Inc. to become a
Certified Fiber Optic Technician (CFOT).

BDI DataLink, Certified Fiber Optics Technician Course
24 Classroom Hours (Actual hours may vary depending on number of students.)



Kerry Hammer
Instructor Signature

20811455
CFOT #

February 21, 2024
Issue Date

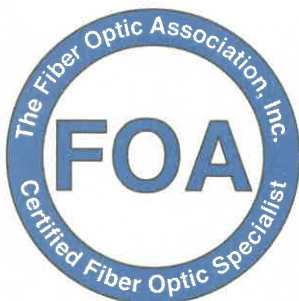


*This FOA Course is
Recognized by the
US Department of Labor.*

Certified Fiber Optic Specialist/Testing *Walfrido J Maulini*

has successfully completed the FOA, CFOS/T
Certified Fiber Optic Specialist in Testing Course.

BDI DataLynk, Certified Fiber Optic Specialist in Testing Course
16 Classroom Hours (Actual hours may vary depending on number of students.)



Kerry W. Hammer

Instructor Signature

20811455
CFOT #

February 22, 2024
Issue Date



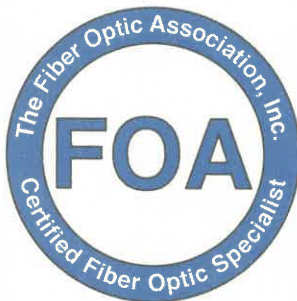
*This FOA Course is
Recognized by the
US Department of Labor.*

Certified Fiber Optic Specialist/Splicing

Walfrido J Maulini

has successfully completed the FOA, CFOS/S
Certified Fiber Optic Specialist in Splicing Course.

BDI DataLink, Certified Fiber Optic Specialist in Splicing Course
16 Classroom Hours (Actual hours may vary depending on number of students.)



Kerry W. Hammer
Instructor Signature

20811455
CFOT #

2/23/2024
Issue Date



*This FOA Course is
Recognized by the
US Department of Labor.*

CERTIFICATE OF ACHIEVEMENT

This certifies that

Walfrido Maulini
Unitec

has successfully completed

**SP3802 - Certifying and Troubleshooting Premises
Cabling Systems ACT II**



James Donovan
Approval

8th May 2024
Issue Date

8th May 2027
Expiry Date

BM918930US201E06
Certificate

BICSI Recognized Continuing Education Credits (CECs)
3 Event ID: OV-COMM-OC-0622-7

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This certificate is a record of training completed and is provided for information purposes only. The certificate shall not be construed to create, indicate, infer or imply any status, partnership, membership of the CommScope PartnerPRO Program or any other relationship between CommScope and the above named company. Furthermore, the above named company does not have any right, power or authority to represent, act, or create any obligations, express or implied, on behalf of or for CommScope. For more details on CommScope's PartnerPro program please visit <https://www.commscope.com/partners/partnerpro-network/>.

CERTIFICATE OF ACHIEVEMENT

This certifies that

Walfrido Maulini
Unitec

has successfully completed

**SP3802 - Certifying and Troubleshooting Premises
Cabling Systems ACT II**



James Donovan
Approval

8th May 2024
Issue Date

8th May 2027
Expiry Date

BM918930US201E06
Certificate

BICSI Recognized Continuing Education Credits (CECs)
3 Event ID: OV-COMM-OC-0622-7

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CERTIFICATE OF ACHIEVEMENT

This certifies that

Joel Balmaseda
Unitec

has successfully completed

**SP3801R - Installing Premises Cabling Systems ACT
I Recertification**


James Donovan
Approval

23rd May 2024
Issue Date

23rd May 2027
Expiry Date

BM920274US201E00
Certificate

BICSI Recognized Continuing Education Credits (CECs)
2 Event ID: OV-COMM-OC-0622-6

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CERTIFICATE OF ACHIEVEMENT

This certifies that

Joel Balmaseda
Unitec

has successfully completed

SP3000 - Structured Cabling Infrastructure Design ACT III


James Donovan
Approval

22nd May 2024
Issue Date

22nd May 2027
Expiry Date

BM920138US201E09
Certificate

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CERTIFICATE OF ACHIEVEMENT

This certifies that

Joel Balmaseda
Unitec

has successfully completed

**SP3802 - Certifying and Troubleshooting Premises
Cabling Systems ACT II**


James Donovan
Approval

23rd May 2024
Issue Date

23rd May 2027
Expiry Date

BM920264US201E03
Certificate

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This certificate is a record of training completed and is provided for information purposes only. The certificate shall not be construed to create, indicate, infer or imply any status, partnership, membership of the CommScope PartnerPRO Program or any other relationship between CommScope and the above named company. Furthermore, the above named company does not have any right, power or authority to represent, act, or create any obligations, express or implied, on behalf of or for CommScope. For more details on CommScope's PartnerPro program please visit <https://www.commscope.com/partners/partnerpro-network/>.



Joel Balmaseda

has successfully completed

HDBaseT Installer Expert Program

Melissa Knapp

Melissa Knapp
Enterprise Training Manager



Course Completed on:

12/4/19

Total CECS:

1

BICSI Event ID:

OV-BELD-IN-0618-1

Note: This attestation does not authorize the technician or the technicians company, to i) offer Certified Systems, ii) perform maintenance or MAC activities on existing Certified Systems unless directly supervised by a Certified PartnerAlliance Installer, or iii) represent themselves in any way as a Belden Certified PartnerAlliance Installer.

Certificate of Completion

Presented by The Siemon Company

This certifies that

Joel Balmaseda

of

Unitec

has completed the Certification ~~Design Principles and Installation Practices course~~
that is required to become a Siemon Cabling System® Trained Designer/Installer.

Event ID: OV-SIEM-CT-0522-2

This course is recognized for 6 BICSI CECs:

Registration Number: 24102414-P-ONLINE-NA

Original Approval: October 24, 2024

Current Certificate: October 24, 2024

Date of Expiration: October 24, 2026



on behalf of The Siemon Company





WESTELL

*Certificate of
Training*

This is to certify that
Joel Balmaseda
of
Unitec Inc

has completed the course in

Westell PS-Series Installation and Maintenance Certification

A handwritten signature in black ink, likely belonging to Kevin McAneney.

Kevin McAneney, Technical Support Engineer
Westell Technologies

6/8/2022
Date





WESTELL

*Certificate of
Training*

This is to certify that

Joel Balmaseda

of

Unitec Inc.

has completed the course in

ProtectLink Public Safety DAS Maintenance & Installation



A handwritten signature in black ink.

Kevin McAneney, Technical Support Engineer
Westell Technologies

5/5/2022

Date

ButterflyMX Certified Installer



This is to certify that

Joel Balmaseda

satisfied the requirements for the completion of

ButterflyMX Installer Training

This installer was certified:

10/30/2024



A handwritten signature in black ink, reading "Aaron Rudenstine".

Aaron Rudenstine, CEO

UNIVERSITY OF CENTRAL FLORIDA

Division of Continuing Education



Hereby Awards This Certificate To

Joel Balmaseda

For successful completion of the
Certified Fiber Optics Technician Course (CFOT)

24 Contact hours
May 6, 2015 - May 8, 2015
Orlando, Florida

A red ink signature of Peter Morcombe, written over a horizontal line.

Peter Morcombe
Instructor

A blue ink signature of Maria Cherjovsky, written over a horizontal line.

Maria Cherjovsky
Assistant Director, Continuing Education



Occupational Safety
and Health Administration

20-602086312

This card acknowledges that the recipient has successfully completed:

30-hour Construction Safety and Health

This card issued to:

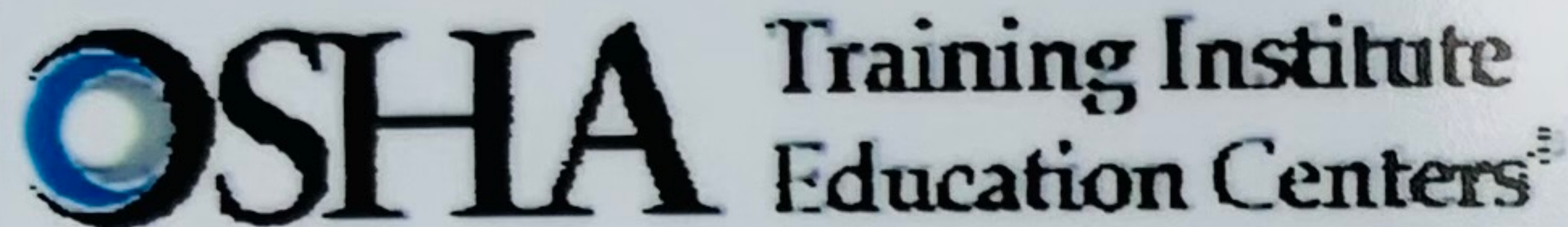
Joel Balmaseda

Rocky Zapata

Trainer Name

4/8/2021

Date Issued



University of South Florida

813-994-1195

usfotiec-cards@usf.edu

OSHA recommends Outreach Training Courses as an orientation to occupational safety and health for workers. Participation is voluntary. Workers must receive additional training on specific hazards of their job. This course completion card does not expire.

Use or distribution of this card for fraudulent purposes, including false claims of having received training, may result in prosecution under 18 U.S.C. 1001. Potential penalties include substantial criminal fines, imprisonment up to 5 years, or both.

To verify this training scan the QR code with your mobile device.



Rev. 1/2016



Occupational Safety
and Health Administration

20-602086319

This card acknowledges that the recipient has successfully completed:

30-hour Construction Safety and Health

This card issued to:

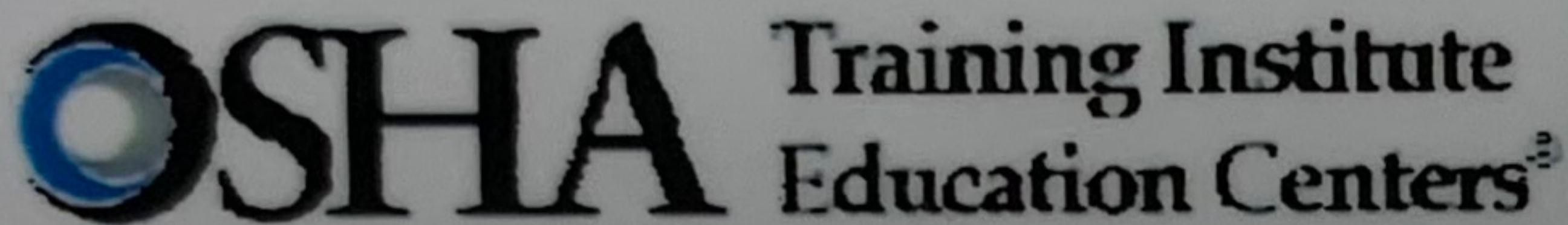
Javier Parera

Rocky Zapata

Trainer Name

4/8/2021

Date Issued



University of South Florida

813-994-1195

usfotiec-cards@usf.edu

OSHA recommends Outreach Training Courses as an orientation to occupational safety and health for workers. Participation is voluntary. Workers must receive additional training on specific hazards of their job. This course completion card does not expire.

Use or distribution of this card for fraudulent purposes, including false claims of having received training, may result in prosecution under 18 U.S.C. 1001. Potential penalties include substantial criminal fines, imprisonment up to 5 years, or both.

To verify this training scan the QR code with your mobile device.



Rev. 1/2016

CORNING

See the Light®
Training Program

CERTIFICATE OF COMPLETION

Corning Optical Communications Recognizes

Edwin Vargas

for completion of the See the Light® Training:

Complete Virtual Corning Fiber Design (CFD) - November 13th - 17th, 2023 from 11:00am to 3:00pm ET

on

Date: November 17, 2023



Corning Authorized Instructor - Program Manager



20 BICSI Continuing Education Credit[s] Earned

BICSI EVENT ID: OV-CORN-NC-0821-3



Corning Optical Communications LLC • 4200 Corning Place • Charlotte, NC 28216 USA

800-743-2675 • FAX: 828-325-5060 • International: +1-828-901-5000 • www.corning.com/opcomm

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CERTIFICATE OF COMPLETION



LEARNING ACADEMY

The Certificate of Completion is Awarded to

Javier Parera

in Recognition of Participation in

OSP102: Applied Outside Plant Design (VC-OSP102-VR-0325)

March 14, 2025



A handwritten signature in black ink, appearing to read 'Penni', is positioned above a horizontal line.

Penni Ferguson, Vice President of Professional Development

CERTIFICATE OF COMPLETION



LEARNING ACADEMY

The Certificate of Completion is Awarded to

Edwin Vargas

in Recognition of Participation in

DD102: Applied Best Practices for Telecommunications Distribution Design (CL-DD102-FL-0424)

March 29, 2024



Penni Ferguson, Vice President of Professional Development

It is hereby recognized that

Joel Balmaseda

Has completed the Leviton Network Solutions Certification Course
Copper and Optical Fiber Communications Cabling Systems
on behalf of
Unitec, Inc. - Hialeah, FL

8/22/2023

Certification Date
Expires **12/31/2026**



Asef Baddar, RCDD, DCD
Certification Programs Manager, Leviton Network Solutions



8 BICSI CECs Awarded to Qualified BICSI Credential
Holders BICSI Event ID: OV-LEVI-WA-0123-1

It is hereby recognized that

Edgar Lang

Has completed the Leviton Network Solutions Certification Course
Copper and Optical Fiber Communications Cabling Systems
on behalf of
Unitec, Inc. - Hialeah, FL

8/22/2023

Certification Date
Expires 12/31/2026

A handwritten signature in black ink that reads "Asef Baddar".

Asef Baddar, RCDD, DCD
Certification Programs Manager, Leviton Network Solutions

It is hereby recognized that

Edwin Vargas

Has completed the Leviton Network Solutions Certification Course
Copper and Optical Fiber Communications Cabling Systems
on behalf of
Unitec, Inc. - Hialeah, FL

8/22/2023

Certification Date
Expires 12/31/2026



Asef Baddar, RCDD, DCD
Certification Programs Manager, Leviton Network Solutions

US Only

e-Train



Edwin Vargas
Completed the following
3M training program:

02 Fire Protection Products eTrain: Through Penetration

**Backed by 3M quality,
innovation and experience**

Issued: 2023-02-26

Expires: 3 years from completion date

Quality Firestopping Starts with Professional Training



US Only

e-Train



Edgar Lang
Completed the following
3M training program:

02 Fire Protection Products eTrain: Through Penetration

Backed by 3M quality,
innovation and experience

Issued: 2023-02-20

Expires: 3 years from completion date

Quality Firestopping Starts with Professional Training





LOCAL VENDOR PREFERENCE CERTIFICATION

SECTION 1 GENERAL TERM

LOCAL PREFERENCE

The evaluation of competitive bids is subject to section 35.36 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to local businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with either of the following objective criteria as of the bid or proposal submission date stated in the solicitation. A local business shall be defined as:

1. "Local Pembroke Pines Vendor" shall mean a business entity which has maintained a permanent place of business with full-time employees within the City limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the City of Pembroke Pines.

OR;

2. "Local Broward County Vendor" shall mean or business entity which has maintained a permanent place of business with full-time employees within the Broward County limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the Broward County or the city within Broward County where the business resides.

A preference of five percent (5%) of the total evaluation point, or five percent (5%) of the total price, shall be given to the **Local Pembroke Pines Vendor(s)**; A preference of two and a half percent (2.5%) of the total evaluation point for local, or two and a half percent (2.5%) of the total price, shall be given to the **Local Broward County Vendor(s)**.

COMPARISON OF QUALIFICATIONS

The preferences established in no way prohibit the right of the City to compare quality of supplies or services for purchase and to compare qualifications, character, responsibility and fitness of all persons, firms or corporations submitting bids or proposals. Further, the preference established in no way prohibit the right of the city from giving any other preference permitted by law instead of the preferences granted, nor prohibit the city to select the bid or proposal which is the most responsible and in the best interests of the city.

SECTION 2 AFFIRMATION

LOCAL PREFERENCE CERTIFICATION:

- ☐ Place a check mark here only if affirming bidder meets requirements above as a Local Pembroke Pines Vendor. In addition, the business must attach a current business tax receipt from the City of Pembroke Pines along with any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.
- ☒ Place a check mark here only if affirming bidder meets requirements above as a Local Broward County Vendor. In addition, the business must attach a current business tax receipt from the Broward County or the city within Broward County where the business resides along with any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.
- ☐ Place a check mark here only if affirming bidder does not meet the requirements above as a Local Vendor.

Failure to complete this certification at this time (by checking either of the boxes above) shall render the vendor ineligible for Local Preference. This form must be completed by/for the proposer; the proposer WILL NOT qualify for Local Vendor Preference based on their sub-contractors' qualifications.

COMPANY NAME: Unitec Inc.

PRINTED NAME / AUTHORIZED SIGNATURE: Katiuska Hurles

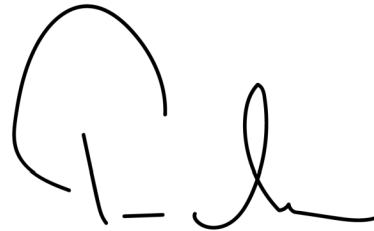
State of Florida

Minority Business Certification

Unitec Inc.

Is certified under the provisions of
287 and 295.187, Florida Statutes, for a period from:

09/14/2023 to 09/14/2025



J. Todd Inman
Florida Department of Management Services

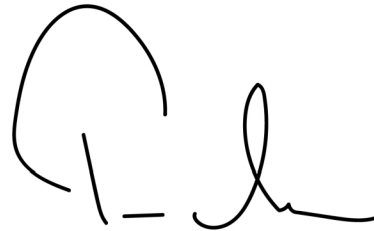
State of Florida

Woman & Minority Business Certification

Unitec Inc.

Is certified under the provisions of
287 and 295.187, Florida Statutes, for a period from:

09/14/2023 to 09/14/2025



J. Todd Inman
Florida Department of Management Services

State of Florida

Woman & Minority Business Certification

Unitec Inc.

Is certified under the provisions of
287 and 295.187, Florida Statutes, for a period from:

09/03/2025 to 09/03/2027



Pedro Allende
Florida Department of Management Services

Unitec Inc. Response

Pricing unsealed at Sep 9, 2025 2:32 PM

CONTACT INFORMATION

Company

Unitec Inc.

Email

sescorcia@unitecus.com

Contact

Sophia Escorcia

Address

480 W 83rd Street

Hialeah, FL 33014

Phone

N/A

Website

www.unitecus.com

Submission Date

Sep 9, 2025 10:42 AM (Eastern Time)

ADDENDA CONFIRMATION

✔ Addendum #1

Confirmed Sep 2, 2025 2:49 PM by Sophia Escorcia

QUESTIONNAIRE

1. CONFIRMATION TO BIND

1.1. I certify that I have read, understood and agree to the terms in this solicitation, and that I am authorized to submit this response on behalf of my company.*

✔ Confirmed

✔ Pass ☐ Fail

2. CERTIFICATION OF INSURANCE COMPLIANCE AND INTENT TO PROCURE REQUIRED COVERAGE

NOTE: Vendors are not required to purchase any additional insurance in order to submit a bid. However, they must certify that they either currently hold, or are able and willing to obtain, all required insurance coverages, endorsements, and limits prior to award and execution of the contract.

2.1. I certify that, if awarded this contract, I will be required to obtain and maintain all insurance policies as detailed in the **INSURANCE REQUIREMENTS** Section of this solicitation before any work may commence, and throughout the life of the contract.*

✔ Confirmed

✔ Pass ☐ Fail

2.2. Do you confirm that you will only use insurance carriers licensed to do business in the State of Florida and rated no less than "A" as to management, and no less than "Class VI" as to financial strength by A.M. Best, and that you understand all endorsements required (e.g., Additional Insured, Waiver of Subrogation, etc.) must be included?*

Yes

✔ Pass ☐ Fail

2.3. Do you currently carry insurance policies that meet or exceed the minimum requirements outlined in the **INSURANCE REQUIREMENTS** section of this solicitation?*

Yes

✔ Pass ☐ Fail

2.3.1. Please upload your current certificate(s) of insurance that demonstrate compliance with the insurance requirements outlined in this solicitation.*

☒ Pass ☐ Fail

 [City_of_Pembroke_Pines_COI.pdf](#)

 [Unitec_Inc_COI.pdf](#)

2.4. Do you believe you are exempt from one or more insurance requirements (e.g., Workers' Compensation)?*

☒ Pass ☐ Fail

No

2.5. Do you plan on using subcontractors for this project?*

☒ Pass ☐ Fail

No

3. REFERENCE # 1

The minimum experience for this project is **five (5) years**. Provide specific examples of similar experience conducting licensed work of equal or similar scope of work, preferably delivered by the proposed team members. A **minimum of 3** references should be from the last **five years** and should be capable of explaining and confirming your firm's capacity to successfully complete the scope of work outlined herein. As part of the proposal evaluation process, the City may conduct an investigation of references, including a record check or consumer affairs complaints. Proposers' submission of a proposal constitutes acknowledgment of the process and consent to investigate. The City is the sole judge in determining Proposers qualifications. In this section you will have the ability to enter information for 5 different references including their contact details and specific project information.

Please note that the City prefers references who are not current employees of the City of Pembroke Pines, as we generally do not contact our own employees for reference checks.

Proposers are advised to confirm that:

1. Each reference provided by the Respondent has up to date contact persons and contact information;
2. The contact person provided for each reference is someone who has personal knowledge of the Proposer's performance during the referenced project; and
3. The contact person for each reference has been contacted by the Proposer regarding this specific bid submittal and such person confirmed their willingness to serve as a reference.

3.1. Reference Contact Information - Name of Firm, City, County or Agency*

☒ Pass ☐ Fail

City of Sunny Isles

3.2. Reference Contact Information - Reference's Business Address*

☒ Pass ☐ Fail

18070 Collins Avenue, Sunny Isles Beach, FL 33160

3.3. Reference Contact Information - Reference's Contact Name & Title*

☒ Pass ☐ Fail

Derrick Arias, Chief Information Officer

3.4. Reference Contact Information - Reference's E-mail Address*

☒ Pass ☐ Fail

darias@sibfl.net

3.5. Reference Contact Information - Reference's Phone Number*

☒ Pass ☐ Fail

(305) 792-1832

3.6. Project Information - Was your firm the prime contractor for the listed project?*

☒ Pass ☐ Fail

Yes

3.7. Project Information - Name of Contactor Performing the Work*

☒ Pass ☐ Fail

Unitec Inc. is the contractor performing the work.

License Numbers: CGC1527259 (General Contractor) | ES12001883 (Low Voltage Contractor) | CUC1224567 (Underground Utility & Excavation Contractor) | ES12001847 (Low Voltage Contractor) | EC13010211 (Electrical Contractor)

3.8. Project Information - Name and location of the project*

☒ Pass ☐ Fail

Name : Citywide Fiber Network Deployment

Location: The City of Sunny Isles Beach

3.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*

☒ Pass ☐ Fail

Unitec Inc. was responsible for the installation of fiber through designated pathways, utilizing existing conduit & handholes wherever possible, and deploying additional conduits & handholes as needed to reach designated City facilities. All fiber route connections were terminated and tested.

Our responsibilities also included obtaining applicable permits, ensuring compliance with City requirements, and delivering signed and sealed As-Built Plans upon project completion. Unitec's staff was directly responsible for overseeing the fiber installation, conduit deployment, and documentation of the final installed routes to ensure the project met technical, safety, time, and regulatory standards.

3.10. Project Information - Project Duration*☒ Pass ☐ Fail

07.26.2022 - 11.17.2023

3.11. Project Information - Completion (Anticipated) Date*☒ Pass ☐ Fail

Completed - 11.17.2023

3.12. Project Information - Size of Project*☒ Pass ☐ Fail

The project spanned multiple different locations within Sunny Isles Beach including directional bore and termination of fiber optics across multiple different municipality buildings.

3.13. Project Information - Cost of Project*☒ Pass ☐ Fail

\$417,273.51

4. REFERENCE # 2

4.1. Reference Contact Information - Name of Firm, City, County or Agency*☒ Pass ☐ Fail

City of Coral Gables

4.2. Reference Contact Information - Reference's Business Address*☒ Pass ☐ Fail

2151 Salzedo St, Coral Gables, FL 33134

4.3. Reference Contact Information - Reference's Contact Name & Title*☒ Pass ☐ Fail

Nelson Gonzalez, MSIA, CISSP Assistant Director

4.4. Reference Contact Information - Reference's E-mail Address*☒ Pass ☐ Fail

ngonzalez@coralgables.com

4.5. Reference Contact Information - Reference's Phone Number*☒ Pass ☐ Fail

(305) 460-5076 or (786) 525-5851

4.6. Project Information - Was your firm the prime contractor for the listed project?*☒ Pass ☐ Fail

Yes

4.7. Project Information - Name of Contactor Performing the Work*☒ Pass ☐ Fail

Unitec Inc. is the contractor performing the work.

License Numbers: CGC1527259 (General Contractor) | ES12001883 (Low Voltage Contractor) | CUC1224567 (Underground Utility & Excavation Contractor) | ES12001847 (Low Voltage Contractor) | EC13010211 (Electrical Contractor)

4.8. Project Information - Name and location of the project*☒ Pass ☐ Fail

Name: Fiber Optic Backbone Expansion

Location: The City of Coral Gables

4.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*☒ Pass ☐ Fail

Unitec Inc. was responsible for the fiber optic design and deployment of the underground corridor within Coral Gables Smart area. The work included installation of new conduits via directional bore, placement of handholes, and utilization of existing vaults and pathways to establish the main corridor from the City's Innovation and Technology Headquarters to the Youth Center Building, with several laterals branching to critical network nodes and service points.

Our team performed the pulling, splicing, and termination of fiber into designated City facilities, ensuring reliable connectivity to multiple buildings. Additionally, staff worked in coordination with City-assigned personnel to review existing corridor plans, validate pathway clearances, and confirm the new backbone infrastructure ...

Show all ▼

4.10. Project Information - Project Duration*☒ Pass ☐ Fail

12/2022 - 01/2025

4.11. Project Information - Completion (Anticipated) Date*☒ Pass ☐ Fail

4.12. Project Information - Size of Project*

☒ Pass ☐ Fail

The project spanned multiple different locations within Coral Gables including directional bore and termination of fiber optics across multiple different municipality buildings.

4.13. Project Information - Cost of Project*

☒ Pass ☐ Fail

\$662,500.00

5. REFERENCE # 3

5.1. Reference Contact Information - Name of Firm, City, County or Agency*

☒ Pass ☐ Fail

City of Tamarac

5.2. Reference Contact Information - Reference's Business Address*

☒ Pass ☐ Fail

10101 State St, Tamarac, FL 33321

5.3. Reference Contact Information - Reference's Contact Name & Title*

☒ Pass ☐ Fail

James Twigger, Chief Information Officer

5.4. Reference Contact Information - Reference's E-mail Address*

☒ Pass ☐ Fail

james.twigger@tamarac.org

5.5. Reference Contact Information - Reference's Phone Number*

☒ Pass ☐ Fail

(954) 597-3900

5.6. Project Information - Was your firm the prime contractor for the listed project?*

☒ Pass ☐ Fail

Yes

5.7. Project Information - Name of Contactor Performing the Work*

☒ Pass ☐ Fail

Unitec Inc. is the contractor performing the work.

License Numbers: CGC1527259 (General Contractor) | ES12001883 (Low Voltage Contractor) | CUC1224567 (Underground Utility & Excavation Contractor) | ES12001847 (Low Voltage Contractor) | EC13010211 (Electrical Contractor)

5.8. Project Information - Name and location of the project*

☒ Pass ☐ Fail

Fiber Network Expansion (Phase 2) - City of Tamarac

5.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*

☒ Pass ☐ Fail

Unitec Inc. was responsible for the expansion of the City of Tamarac's fiber network to various municipal buildings and public parks. The scope of work included directional boring for underground pathways, pulling fiber optic cabling through newly installed and existing conduits, and performing fiber splicing to establish connectivity across all designated sites.

Our staff managed the full lifecycle of the project, including coordination with the City, execution of field work, quality inspections, and testing to ensure all connections met industry standards. Unitec's technicians and project manager worked closely together to deliver a compliant, reliable, and future-ready fiber infrastructure to support the City of Tamarac's communications needs.

5.10. Project Information - Project Duration*

☒ Pass ☐ Fail

09/03/2021 - 10/30/2023

5.11. Project Information - Completion (Anticipated) Date*

☒ Pass ☐ Fail

Completed - 10/30/2023

5.12. Project Information - Size of Project*

☒ Pass ☐ Fail

The project spanned multiple different locations within Tamarac including directional bore and termination of fiber optics across multiple different municipality buildings.

5.13. Project Information - Cost of Project*

☒ Pass ☐ Fail

\$1.3 Million

6. REFERENCE # 4

6.1. Reference Contact Information - Name of Firm, City, County or Agency Breezeline	☒ Pass ☐ Fail
6.2. Reference Contact Information - Reference's Business Address 10785 Marks Way, Miramar, FL 33025	☒ Pass ☐ Fail
6.3. Reference Contact Information - Reference's Contact Name & Title Luis Paez & Construction Project Manager	☒ Pass ☐ Fail
6.4. Reference Contact Information - Reference's E-mail Address lpaez@breezeline.com	☒ Pass ☐ Fail
6.5. Reference Contact Information - Reference's Phone Number (786) 230-0365	☒ Pass ☐ Fail
6.6. Project Information - Was your firm the prime contractor for the listed project? Yes	☒ Pass ☐ Fail
6.7. Project Information - Name of Contactor Performing the Work Unitec Inc. is the contractor performing the work. License Numbers: CGC1527259 (General Contractor) ES12001883 (Low Voltage Contractor) CUC1224567 (Underground Utility & Excavation Contractor) ES12001847 (Low Voltage Contractor) EC13010211 (Electrical Contractor)	☒ Pass ☐ Fail
6.8. Project Information - Name and location of the project Various city buildings across Miami-Dade County, West Palm Beach, and Broward County varying in size. A majority of our projects over the years have been located within the Miami area within large scale building.	☒ Pass ☐ Fail
6.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for Unitec Inc. provides daily installation services on behalf of Breezeline for residential and commercial customers throughout Miami-Dade, Palm Beach, and Broward Counties. Our scope of work includes internet, television, and phone service installations, as well as outside plant expansion such as conduit installation, trenching, and pulling Category cable or fiber optic cabling within residential communities and municipalities. Our staff is responsible for executing all work in compliance with industry and client standards, conducting on-site inspections, and maintaining 24/7 on-call availability for emergency repairs. Unitec manages a dedicated team of technicians under the leadership of a project manager, who serves as the primary point of coordination with Breezeline. The project manager oversees scheduling, communication, and the preparation of project proposals to ensure seamless execution and responsiveness to Breezeline's operational needs.	☒ Pass ☐ Fail
6.10. Project Information - Project Duration On-going contract of 25 years	☒ Pass ☐ Fail
6.11. Project Information - Completion (Anticipated) Date On going contract of 25 years	☒ Pass ☐ Fail
6.12. Project Information - Size of Project Project size can vary from a small apartment unit to large scale buildings located in high traffic areas this includes residential, commercial, institutional, and other municipalities.	☒ Pass ☐ Fail
6.13. Project Information - Cost of Project Over \$3,000,000.00 worth of project values over the course of 25 years	☒ Pass ☐ Fail
7. REFERENCE # 5	
7.1. Reference Contact Information - Name of Firm, City, County or Agency Miami-Dade County	☒ Pass ☐ Fail
7.2. Reference Contact Information - Reference's Business Address 2740 NW 104th Ct, Doral, FL 33172	☒ Pass ☐ Fail
7.3. Reference Contact Information - Reference's Contact Name & Title	☒ Pass ☐ Fail

7.4. Reference Contact Information - Reference's E-mail Address

☒ Pass ☐ Fail

kenweilbacher@dadeschools.net

7.5. Reference Contact Information - Reference's Phone Number

☒ Pass ☐ Fail

(305) 219-5239 & (305) 995-3285

7.6. Project Information - Was your firm the prime contractor for the listed project?

☒ Pass ☐ Fail

Yes

7.7. Project Information - Name of Contactor Performing the Work

☒ Pass ☐ Fail

Unitec Inc. is the contractor performing the work.

License Numbers: CGC1527259 (General Contractor) | ES12001883 (Low Voltage Contractor) | CUC1224567 (Underground Utility & Excavation Contractor) | ES12001847 (Low Voltage Contractor) | EC13010211 (Electrical Contractor)

7.8. Project Information - Name and location of the project

☒ Pass ☐ Fail

Miami-Dade County: Zoo Miami Admin-Trailers Complex OSP RPQ 202401402456, Northeast Transfer Station Low Voltage 202501400673

Location: Zoo Miami, NE Transfer Station

7.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for

☒ Pass ☐ Fail

Unitec Inc. has an on-going contract since 2023 requesting work on an as-needed basis. Unitec is responsible for providing telecommunications and low-voltage infrastructure services for Miami-Dade County projects this includes but is not limited to Cat cabling, fiber optics, and directional bore. For MDC Zoo Miami Admin Trailer Complex we were required to Install underground conduits and handholes, as well as Pull boxes and Fiber Optic to interconnect several trailers in the Miami Zoo. For NE Transfer Station we were required to run fiber from their administrative building to the scale house, installing 2" conduit accessing via manhole using directional bore and proofing pipe. We were also required to install handholes in the designated areas.

Unitec staff is responsible for coordinated permitting, site access clearance, and compliance with County specifications, while managing splicing, testing, and certification to ensure reliable connectivity.

7.10. Project Information - Project Duration

☒ Pass ☐ Fail

On-going since 2023 on an as-needed basis

7.11. Project Information - Completion (Anticipated) Date

☒ Pass ☐ Fail

On-going since 2023 on an as-needed basis

7.12. Project Information - Size of Project

☒ Pass ☐ Fail

The project spanned multiple different locations within Miami-Dade County with some projects including directional bore, termination of fiber optics, installment of cat cabling, or a mixture of all three.

7.13. Project Information - Cost of Project

☒ Pass ☐ Fail

Combined Miami Zoo & NE Transfer cost \$50,000.00, but we've completed over \$100,000.00 with pending \$400,000.00 of work

8. PROJECT DOCUMENTS

8.1. PROPOSERS BACKGROUND INFORMATION FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Proposers Background Information Form \(1\).xlsx](#)

 [Proposer Background Information.xlsx](#)

9. SWORN STATEMENT ON PUBLIC ENTITY CRIMES UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a)

9.1. SWORN STATEMENT ON PUBLIC ENTITY CRIMES FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Sworn Statement on Public Entity Crimes.pdf](#)

 [Sworn Statement on Public Entity Crimes.pdf](#)

9.2. Public Entity Crimes Status*

☒ Pass ☐ Fail

- Which option did you select on the Sworn Statement on Public Entity Crimes Form:
 - A) Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.
 - B1) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)
 - B2) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)
 - B3) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND The person or affiliate has not been placed on the convicted vendor list. (Please describe any action taken by or pending with the Department of General Services.)

A) No convictions.

9.3. Did you select option B1 or B2 above?*

☒ Pass ☐ Fail

No

9.4. Did you select option B3 above?*

☒ Pass ☐ Fail

No

10. EQUAL BENEFITS CERTIFICATION FOR DOMESTIC PARTNERS AND ALL MARRIED COUPLES

10.1. EQUAL BENEFITS CERTIFICATION FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Equal Benefits Certification Form.pdf](#)

 [Equal Benefits Certification Form.pdf](#)

10.2. Equal Benefits Status*

☒ Pass ☐ Fail

- Which option did you select on the Equal Benefits Certification Form:
 - A. Contractor currently complies with the requirements of this section; or
 - B. Contractor will comply with the conditions of this section at the time of contract award; or
 - C. Contractor will not comply with the conditions of this section at the time of contract award; or
 - D. Contractor does not comply with the conditions of this section because of the following allowable exemption (Check only one box below):
 - 1. The Contractor does not provide benefits to employees' spouses in traditional marriages;
 - 2. The Contractor provides an employee the cash equivalent of benefits because the Contractor is unable to provide benefits to employees' Domestic Partners or spouses despite making reasonable efforts to provide them. To meet this exception, the Contractor shall provide a notarized affidavit that it has made reasonable efforts to provide such benefits. The affidavit shall state the efforts taken to provide such benefits and the amount of the cash equivalent. Cash equivalent means the amount of money paid to an employee with a Domestic Partner or spouse rather than providing benefits to the employee's Domestic Partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee's spouse;
 - 3. The Contractor is a religious organization, association, society, or any non-profit charitable or educational institution or organization operated supervised or controlled by or in conjunction with a religious organization, association, or society;
 - 4. The Contractor is a governmental agency;

A) Contractor currently complies.

10.3. Did you select option D2 above?*

☒ Pass ☐ Fail

No

11. DRUG-FREE WORKPLACE CERTIFICATION

11.1. VENDOR DRUG FREE WORKPLACE CERTIFICATION FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Vendor_Drug-Free_Workplace_Certification_Form.pdf](#)

 [Vendor_Drug_Free_Workplace_Form.pdf](#)

11.2. Drug-Free Status*

☒ Pass ☐ Fail

Complies fully.

12. STANDARD DOCUMENTS

The following documents are standard documents that the City generally requires for every solicitation. As a result, we recommend vendors to keep these documents updated and readily available so that they can be easily uploaded for each project that the vendor would like to participate in. In the event that the City does not have one of the forms or documents listed below for your company, the City may reach out to your company after the bid has closed to obtain the document(s).

12.1. NON-COLLUSIVE AFFIDAVIT*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Non-Collusive_Affidavit.pdf](#)

 [Non-Collusive_Affidavit.pdf](#)

12.2. SCRUTINIZED COMPANY CERTIFICATION*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Scrutinized_Company_Certification.pdf](#)

 [Scrutinized_Company_Certification.pdf](#)

12.3. E-VERIFY SYSTEM CERTIFICATION*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.
2. Effective January 1, 2021, pursuant to Section 448.095, Florida Statutes, the City may not enter into a contract with a vendor/contractor/subcontractor unless that vendor/contractor/subcontractor is registered with and uses the E-Verify system administered by the U.S. Department of Homeland Security ("DHS").
3. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract.

 [E-Verify_System_Certification_Statement.pdf](#)

 [E-Verify_System_Certification_Form.pdf](#)

12.4. HUMAN TRAFFICKING AFFIDAVIT*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Human_Trafficking_Affidavit.pdf](#)

 [Human_Trafficking_Affidavit.pdf](#)

13. VENDOR REGISTRATION

13.1. Do you currently have a City of Pembroke Pines Vendor Number registered in the PaymentWorks System?*

☒ Pass ☐ Fail

- The City of Pembroke Pines utilizes OpenGov as its e-Procurement platform for solicitation and bid submission purposes. However, please be advised that **vendor registration for onboarding and processing payments is handled separately** through the City's Accounts Payable Division using **PaymentWorks**, a secure online vendor management platform.
- All vendors that will be submitting invoices and requiring payments from the City are required to register on the PaymentWorks platform. If the vendor is not currently registered with the City via PaymentWorks and does not have a Vendor Number, the City will have to invite the vendor to register.
- For formal solicitations such as this project, the Procurement Department will send PaymentWorks registration invitations to vendor(s) who are under active consideration for award. Please be aware that not all vendors who submit proposals will receive an invitation, in order to manage system usage and avoid onboarding vendors who are unlikely to receive payments from the City.
- Invitations will typically be sent to the contact listed on the submitted Vendor Information Form.

No

13.2. VENDOR INFORMATION FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Vendor Information Form.pdf](#)

 [Vendor Information Form.pdf](#)

13.3. FORM W-9 (REVISED MARCH 2024)*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.
2. Note - Please use the March 2024 version of the form as previously dated versions of this form may delay the processing of any payments to the selected vendor.

 [Form W-9 \(Rev March 2024\).pdf](#)

 [Form W-9.pdf](#)

14. OPTIONAL DOCUMENTATION

14.1. TRADE SECRETS

1. The Proposer's response to this solicitation is a public record pursuant to Florida law, which is subject to disclosure by the City under the State of Florida Public Records Law, Florida Statutes Chapter 119.07 ("Public Records Law"). The City shall permit public access to all documents, papers, letters or other material submitted in connection with this solicitation and the Contract to be executed for this solicitation, subject to the provisions of Chapter 119.07 of the Florida Statutes.
2. Any language contained in the Proposer's response to the solicitation purporting to require confidentiality of any portion of the Proposer's response to the solicitation, except to the extent that certain information is in the City's opinion a Trade Secret pursuant to Florida law, shall be void. If a Proposer submits any documents or other information to the City which the Proposer claims is Trade Secret information and exempt from Florida Statutes Chapter 119.07 ("Public Records Laws"), the Proposer shall clearly designate that it is a Trade Secret and that it is asserting that the document or information is exempt. The Proposer must specifically identify the exemption being claimed under Florida Statutes 119.07. The City shall be the final arbiter of whether any information contained in the Proposer's response to the solicitation constitutes a Trade Secret.
3. EXCEPT FOR CLEARLY MARKED PORTIONS THAT ARE BONA FIDE TRADE SECRETS PURSUANT TO FLORIDA LAW, DO NOT MARK YOUR RESPONSE TO THE SOLICITATION AS PROPRIETARY OR CONFIDENTIAL. DO NOT MARK YOUR RESPONSE TO THE SOLICITATION OR ANY PART THEREOF AS COPYRIGHTED. ALL DOCUMENTS THAT THE FIRM PURPORTS TO BE CONFIDENTIAL, PROPRIETARY OR A TRADE SECRET SHALL BE UPLOADED TO THE OPENGOV WEBSITE AS A SEPARATE ATTACHMENT, IN THIS SECTION, CLEARLY IDENTIFYING THE EXEMPTION BEING CLAIMED UNDER FLORIDA STATUTES 119.07.
4. The city's determination of whether an exemption applies shall be final, and the proposer agrees to defend, indemnify, and hold harmless the city and the city's officers, employees, and agent, against any loss or damages incurred by any person or entity as a result of the city's treatment of records as public records.

No response submitted

14.2. FINANCIAL STATEMENTS

1. The City is **NOT** requesting the vendor to submit any financial statements for this project and prefers if the vendor does not submit financial statements. In addition, if the City needs a copy of the vendor's financial statements, the City can contact the vendor after the bid due date to request those documents. However, if the vendor does submit the financial statements, they should be uploaded in this section.
2. Any claim of confidentiality on financial statements must be asserted at the time of submittal. The firm must identify the specific statute that authorizes the exemption from the Public Records Law. Please note that the financial statement exemption provided for in Section 119.071(1)c, Florida Statutes only applies to submittals in response to a solicitation for a "public works" project.

No response submitted

14.3. ALTERNATIVES

1. If you are submitting an alternative product, please upload any related information in this section (such as specification sheets, etc.).
2. In addition, pursuant to the "**Brand Names**" Section included in the **GENERAL TERMS AND CONDITIONS** Section if and wherever in the specifications a brand name, make, name of manufacturer, trade name, or vendor catalog number is mentioned, it is for the purpose of establishing a grade or quality of material only. Since the City does not wish to rule out other competition and equal brands or makes, the phrase "OR EQUAL" is added. However, if a product other than that specified is bid, Proposers shall indicate on their proposal and clearly state the proposed substitution and deviation. It is the vendor's responsibility to provide any necessary documentation and samples within their bid submittal to prove that the product is equal to that specified. Such samples are to be furnished before the date of bid opening, unless otherwise specified. Additional evidence in the form of documentation and samples may be requested if the proposed brand is other than that specified. The City retains the right to determine if the proposed brand shall be considered as an approved equivalent or not.

No response submitted

14.4. ADDITIONAL INFORMATION

1. Please provide any additional information that you deem necessary to complete your proposal in this section, if it has not been requested in another section.

No response submitted

14.5. PROFESSIONAL LICENSES

☒ Pass ☐ Fail

1. If applicable, please upload any professional licenses that may be required to perform the services outlined in the solicitation.

 [Compiled Certs & Lic.pdf](#)

15. VENDOR CLASSIFICATION

15.1. Is your firm a Local Pembroke Pines Vendor (LPPV) and Local Broward County Vendor (LBCV)?*

☒ Pass ☐ Fail

1. The evaluation of competitive bids is subject to section 35.36 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to local businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with either of the following objective criteria as of the bid or proposal submission date stated in the solicitation. A local business shall be defined as:
1. "Local Pembroke Pines Vendor" shall mean a business entity which has maintained a permanent place of business with full-time employees within the City limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the City of Pembroke Pines, **OR**;
 2. "Local Broward County Vendor" shall mean or business entity which has maintained a permanent place of business with full-time employees within the Broward County limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the Broward County or the city within Broward County where the business resides.
2. A preference of five percent (5%) of the total evaluation point, or five percent (5%) of the total price, shall be given to the Local Pembroke Pines Vendor(s); A preference of two and a half percent (2.5%) of the total evaluation point for local, or two and a half percent (2.5%) of the total price, shall be given to the Local Broward County Vendor(s).

Yes

15.1.1. Please indicate your Local Vendor Status*

☒ Pass ☐ Fail

Local Broward County Vendor (LBCV)

15.1.2. Local Vendor Preference Certification*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Local_Vendor_Preference_Certification.pdf](#)

 [Local_Vendor_Preference_Certification_Form.pdf](#)

15.1.3. Local Business Tax Receipts*

☒ Pass ☐ Fail

1. If claiming Local Vendor Preference, please upload any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.

 [BROWARD COUNTY LBT 2024-2025.pdf](#)

 [BROWARD COUNTY LBT 2025-2026.pdf](#)

 [CUC1224567_EXP_09.30.2026.pdf](#)

15.2. Is your firm a Veteran Owned Small Business (VOSB)?*

☒ Pass ☐ Fail

1. The evaluation of competitive bids is subject to section 35.37 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to veteran owned small businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with the following objective criteria as of the bid or proposal submission date stated in the solicitation.
2. A preference of two and a half percent (2.5%) of the total evaluation point, or two and a half percent (2.5%) of the total price, shall be given to the Veteran Owned Small Business (VOSB).

No

15.3. Is your firm a Minority-Owned Business Enterprise (MBE)?*

☒ Pass ☐ Fail

Yes

15.3.1. Please indicate the classification of your Minority-Owned Business Enterprise (MBE)*

☒ Pass ☐ Fail

Hispanic-American MBE

15.3.2. MBE Certification Documentation*

☒ Pass ☐ Fail

1. Upload your MBE Certification Documentation here, preferably with the State of Florida's Office of Supplier Diversity. If you have multiple MBE certifications, please combine them into one (1) document and upload.

 [Unitec Inc. - State of Florida MBE Exp_09.14.25.pdf](#)

15.4. Is your firm a Woman-Owned Business Enterprise (WBE)?*

☒ Pass ☐ Fail

Yes

15.4.1. WMBE Certification Documentation*

☒ Pass ☐ Fail

1. Upload your WMBE Certification Documentation here, preferably with the State of Florida's Office of Supplier Diversity. If you have multiple WMBE certifications, please combine them into one (1) document and upload.

 [Compiled MWBE.pdf](#)

15.5. Is your firm a HubZone Business / Labor Surplus Area Firm?*

☒ Pass ☐ Fail

No

15.6. Is your firm a Broward County Small Business Enterprise (SBE)?*

☒ Pass ☐ Fail

No

15.7. Is your firm a Broward County Business Enterprise (CBE)?*

☒ Pass ☐ Fail

No

15.8. Is your firm a Broward County Disadvantaged Business Enterprise (DBE)?*

☒ Pass ☐ Fail

No

15.9. Does your firm have a Vendor Classification that was not listed above?*

☒ Pass ☐ Fail

Yes

15.9.1. Other Vendor Classification Certification Documentation*

☒ Pass ☐ Fail

1. Upload your other Certification Documentation here. If you have multiple certifications, please combine them into one (1) document and upload.

 [Compiled DBE & SBE.pdf](#)

PRICE TABLES

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N...
1-1	Lump Sum Cost for Fiber Installation - Fire Station 79 to Soccer Park	1	Lump Sum	\$50,862.99	\$50,862.99	
Total					\$50,862.99	

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N...

2-1	Lump Sum Cost for Fiber Installation - Fire Station 89 to Pines Art Center	1	Lump Sum	\$56,079.62	\$56,079.62
Total				\$56,079.62	