

# 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000006566

**FILED**  
**Jun 27, 2012**  
**Secretary of State**

**Entity Name:** CARA FOUNDATION, INC.

**Current Principal Place of Business:**

600 NE 36 STREET  
APT 1005  
MIAMI, FL 33137

**New Principal Place of Business:**

90 ALTON ROAD  
APT 1902  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

600 NE 36 STREET  
APT 1005  
MIAMI, FL 33137

**New Mailing Address:**

90 ALTON ROAD  
APT 1902  
MIAMI BEACH, FL 33139

**FEI Number:** 65-1046811

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PINTO-TORRES, ADRIANA  
20TH ISLAND AVENUE  
SUITE 205  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

PINTO-TORRES, ADRIANA  
90 ALTON ROAD  
SUITE 1902  
MIAMI BEACH, FL 33139 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: ADRIANA PINTO-TORRES

06/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PATRICOFF, HAROLD E  
Address: 8345 SW 96 ST  
City-St-Zip: MIAMI, FL 33156

Title: D  
Name: BUSCH, CLAUDIA  
Address: 215 E ENID DR  
City-St-Zip: MIAMI, FL 33149

Title: D  
Name: FERRER, TRACY  
Address: 90 ALTON ROAD # 710  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: PINTO-TORRES, ADRIANA  
Address: 90 ALTON ROAD # 1902  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: BALDO, ANTONIO  
Address: 1200 WEST 21 STREET  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D  
Name: DUNIN, CLAUDIA  
Address: 400 SOUTH POINTE DRIVE, # 2404  
City-St-Zip: MIAMI BEACH, FL 33139

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

SIGNATURE: ADRIANA PINTO-TORRES

MS.

06/27/2012

Electronic Signature of Signing Officer or Director

Date