

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
 FLORIDA DEPARTMENT OF STATE  
 Jim Smith  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

03 JAN -2 PM 12:49

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # N01000007788

1. Corporation Name  
 THE CASIMIRO FOUNDATION, INC.

Principal Place of Business Mailing Address  
 11263 NW 53RD LN 11263 NW 53RD LN  
 MIAMI FL 33178 MIAMI FL 33178



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable 10773 NW 58TH ST.		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida 10/30/2000	
Suite, Apt. #, etc. SUITE 268		Suite, Apt. #, etc.		5. FEI Number 65-1047135	
City & State MIAMI, FLORIDA		City & State		Applied For Not Applicable	
Zip 33178	Country USA	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DP	CASIMIRO, JUAN	11263 NW 53RD LN	MIAMI FL 33178
DV	CASIMIRO, GLENDA	3505 94TH ST #5H	JACKSON HEIGHTS NY 11372
DS	JIMENEZ, IVAN	550 BILTMORE WAY 10TH FL	CORAL GABLES FL 33134
<del>D</del>	<del>CABRIERA, JOSE</del>	<del>1502 MYSTERY ST.</del>	<del>WELLINGTON FL 38414</del>
<del>D</del>	<del>WASHINGTON, COLLADO</del>	<del>7400 NW 14TH AVE</del>	<del>ODDONUT CREEK FL 33066</del>
			700009792227 01/02/03--01079--010 **122.50

8. Name and Address of Current Registered Agent <del>REGISTERED AGENTS LEGAL SERVICES, INC 1333 N DUVAL ST TALLAHASSEE FL 32303</del>		9. Name and Address of New Registered Agent Name: JUAN CASIMIRO Street Address (P.O. Box Number is Not Acceptable): 10773 NW 58th Street Suite, Apt. #, Etc.: suite 268 City: MIAMI State: FL Zip Code: 33178	
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10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent: [Signature] REGISTERED AGENT MUST SIGN  
 Date: 12/31/02

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: [Signature] REGISTERED AGENT MUST SIGN  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Date: 12/31/02  
 Daytime Phone #: 305 629 9893

CR2E040 (8/02)

Greetings & Happy New Year -

Please note that per my conversation with one of your representatives on 12/31/02, I was informed to submit this letter noting that the "UBR" form was not received to my actual mailing address. A note in October 2002 was mailed informing you of our new address: 70773 NW 58th St. Suite 268 Miami, Fl. 33198

Nevertheless, please activate our organization for 2002 - 2003 and please update the most recent information noted on application for reinstatement. Please note box # (2), (7), (8) and (9) - (10) (11).

We appreciate your responding to this letter by finding an enclosed check for \$122.50.

Again, thank you and may your New Year be a prosperous

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Jan R