

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000008700

FILED
Oct 07, 2005
Secretary of State

Entity Name: TOGETHER, HAPPY AND FOREVER FOUNDATION CORP

Current Principal Place of Business:

8527 PINES BLVD
SUITE 208
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

8527 PINES BLVD
SUITE 208
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 20-1622758 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FERNANDEZ, LUIS A SR.
8527 PINES BLVD
SUITE 208
PEMBROKE PINES, FL 33024 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: LUIS A. FERNANDEZ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FERNANDEZ, LUIS A SR.
Address: 151 SW 95 TERRACE #202
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: VP () Delete
Name: RIVERA, DAVID S PR.
Address: 8527 PINES BLVD #208
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: S () Delete
Name: FRANCO, ALVARO E SR.
Address: 4953 SW 163 AVE.
City-St-Zip: MIRAMAR, FL 33027 US

Title: T () Delete
Name: RAMIREZ, JAIME SR.
Address: 19156 NW 24 COURT
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: SUBS () Change (X) Addition
Name: FALLAS, MARIO A SR
Address: 111 NW 8TH AVE # B3
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS A. FERNANDEZ

P

10/07/2005

Electronic Signature of Signing Officer or Director

Date