

# 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N10000011850

FILED  
May 21, 2012  
Secretary of State

**Entity Name:** FUNDACION PARA EL DESARROLLO COMUNITARIA CYNTHIA MARINA, INC.

**Current Principal Place of Business:**

17329 SW 54TH ST  
MIRAMAR, FL 33029

**New Principal Place of Business:**

8462 NW 27TH ST  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

17329 SW 54TH ST  
MIRAMAR, FL 33029

**New Mailing Address:**

PO BOX 841304  
PEMBROKE PINES, FL 33084

FEI Number: 27-4388888

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD SUITE A  
TAMPA, FL 33612 US

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

FIGUEROA, DENNIS E  
8462 NW 27TH ST  
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: DENNIS FIGUEROA

05/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: FIGUEROA, DENNIS E  
Address: PO BOX 841304  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: SD  
Name: MATUTE, MARIA E  
Address: PO BOX 841304  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: TD  
Name: RIVERA, ANDRES  
Address: PO BOX 841304  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: D  
Name: SIMON, CLAUDIA S  
Address: PO BOX 841304  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: D  
Name: HERNANDEZ, MARCO T  
Address: PO BOX 841304  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: D  
Name: SIMON, GERARDO A  
Address: PO BOX 841304  
City-St-Zip: PEMBROKE PINES, FL 33084

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: DENNIS FIGUEROA

PD

05/21/2012

Electronic Signature of Signing Officer or Director

Date