PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 APR 11 PM 12:00

900016321419
04/18/03--01034--027 **53.00

REINSTATEMENT 4-9-03
ark

DOCUMENT # N98000006793

1. Corporation Name
NICARAGUAN AMERICAN Foundation Relief CORP.

2. Principal Office Address	3. Mailing Office Address
1550 SW 1 St	1550 SW 1 St
Suite, Apt. #, etc. #13	Suite, Apt. #, etc. #13
City & State MIAMI FL	City & State MIAMI FL
Zip 33135 Country USA	Zip 33135 Country USA

4. Date Incorporated or Qualified To Do Business in Florida 12/2/98

5. FEI Number 65-0888-917 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: RICARDO J. MARENCO

Street Address (P.O. Box Number is Not Acceptable): 1550 SW 1 St

900016321419
04/18/03 01034 028 **420.75

Suite, Apt. #, Etc.: #13

City: MIAMI State: FL Zip Code: 33135

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent X Ricardo J Marenco Date 3/26/2003
REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres/D	Ricardo J. Marenco	6381 W. 24 Ct #205	Hialeah FL 33016
V-Pres/D	Milton R Gonzalez	546 NW 23 PL	Miami FL 33125
Sec/D	Luis Mendoza	120 NW 13 AVE	Miami FL 33125

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for 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: Ricardo J Marenco RICARDO MARENCO 3/26/2003 305-541-7331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #