

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000009171

**FILED**  
**Oct 06, 2009**  
**Secretary of State**

**Entity Name:** TROJAN SAPPHIRE DANCE PARENT ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MICHELLE BAEZ  
7050 NW 169TH STREET  
HIALEAH, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MICHELLE BAEZ  
7050 NW 169TH STREET  
HIALEAH, FL 33015

**New Mailing Address:**

C/O LAURA HERNANDEZ  
6540 NW 170 TER  
HIALEAH, FL 33015

**FEI Number:** 26-4240602      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

TEJERA, JACQUELINE  
19344 NW 56TH PLACE  
MIAMI GARDEN, FL 33055      US

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

HERNANDEZ, LAURA  
6540 NW 170 TER  
HIALEAH, FL 33015      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: LAURA HERNANDEZ

10/06/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: BAEZ, MICHELLE  
Address: 7050 NW 169TH STREET  
City-St-Zip: HIALEAH, FL 33015

Title: P      ( ) Delete  
Name: PATINO, JULIETH  
Address: 835 WEST 74TH STREET  
City-St-Zip: HIALEAH, FL 33014

Title: V      ( ) Delete  
Name: MILIAN, ELIZABETH  
Address: 6401 WEST 22ND COURT  
City-St-Zip: HIALEAH, FL 33016

Title: S      ( ) Delete  
Name: PENA, ANA  
Address: 8013 WEST 15TH AVE  
City-St-Zip: HIALEAH, FL 33016

Title: T      ( ) Delete  
Name: TEJERA, JACQUELINE  
Address: 19344 NW 56TH PLACE  
City-St-Zip: MIAMI GARDEN, FL 33055

Title: D      ( ) Delete  
Name: LLIBRE, KRISTINA  
Address: 14361 LEANING PINE DRIVE  
City-St-Zip: MIAMI LAKE, FL 33014

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: V      (X) Change ( ) Addition  
Name: LOPEZ, MARIANELA  
Address: 6545 MIAMI LAKEWAY S  
City-St-Zip: MIAMI LAKES, FL 33014

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

Title: T      (X) Change ( ) Addition  
Name: HERNANDEZ, LAURA  
Address: 6540 NW 170 TER  
City-St-Zip: HIALEAH, FL 33015

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LAURA HERNANDEZ

T

10/06/2009

Electronic Signature of Signing Officer or Director

Date