

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 JAN 24 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K-55833

1. Corporation Name

PRIVATE GROUPS, INC.

2. Principal Office Address

1172 South Dixie Hwy

Suite, Apt. #, etc.

502

City & State

Coral Gables, FL

Zip

33146

Country

USA

3. Mailing Office Address

1172 South Dixie Hwy.

Suite, Apt. #, etc.

502

City & State

Coral Gables, FL

Zip

33146

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/29/1988

5. FEI Number

65-0146357

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name

Felix R. Fuertes

Street Address (P.O. Box Number is Not Acceptable)

4200 Santa Maria Street

Suite, Apt. #, Fl:

City

Coral Gables.

State

FL

Zip Code

33146-1125

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0905 or 617.0903, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 01 23, 2003

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

Titles	Name of Officer and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CPD	Evangelina Fuertes	823 Marti St	San Juan, PR 00907
D/S	Regina M. Cameron	4200 Santa Maria St	Coral Gables, FL 33146
VTMD	Felix R. Fuertes	4200 Santa Maria St	Coral Gables, FL 33146
VDAS	Roberto Fuertes	823 Marti Street	San Juan, PR 00907

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 taxes 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: Felix R. Fuertes - Managing Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/23/03 305-790-1176

Date

Daytime Phone #