

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 740357

FILED
Oct 31, 2008
Secretary of State

Entity Name: MUNICIPIO DE MORON EN EXILIO, INC.

Current Principal Place of Business:

6825 WEST FLAGLER STREET
P. O. BOX 440622
MIAMI, FL 331449830

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 440622
P. O. BOX 440622
MIAMI, FL 331449830 US

New Mailing Address:

6825 WEST FLAGLER STREET
P. O. BOX 440622
MIAMI, FL 331449830

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

SORI, HECTOR
120 NW 86TH COURT
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

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: HECTOR SORI

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OTERO, LAZARA
Address: 2142 NW 74TH ST
City-St-Zip: MIAMI, FL 33142

Title: VTD () Delete
Name: CASTANEDA, OSCAR
Address: 998 W. 65TH STREET
City-St-Zip: HIALEAH, FL 33012

Title: SD () Delete
Name: DOMINGUEZ, RENE
Address: 8414 NW 1 TERR
City-St-Zip: MIAMI, FL 33126

Title: TD () Delete
Name: CLAVIJO, EDUARDO A
Address: 6061 COLLINS AVE APT 9F
City-St-Zip: MIAMI BEACH, FL 33140

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:

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: EDUARDO CLAVIJO

TD

10/31/2008

Electronic Signature of Signing Officer or Director

Date