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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F96000004648					
1. Corporation Name NATIONAL SOCIETY OF HISPANIC MBA'S INCORPORATED					
2. Principal Office Address - No P.O. Box # 1303 Walnut Hill Lane			3. Mailing Office Address 1303 Walnut Hill Lane		
Suite Apt. # etc. #100			Suite Apt. # etc. #100		
City & State Irving, TX			City & State Irving, TX		
Zip 75038	Country USA	Zip 75038	Country USA	4. Date incorporated or Qualified To Do Business in Florida	
5. FEI Number 95-4196238				Applied For <input type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>					
7. Name and Address of Current Registered Agent Name CT Corporation Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Suite, Apt. #, Etc. City Plantation State FL Zip Code 33324					
8. I, being appointed the registered agent of the above named corporation, am hereby waiving and accepting the obligations of section 807.0506 or 817.0505 F.S. Signature of Registered Agent <i>Kimberly Baggett</i> Kimberly Baggett Assistant Secretary Date 8/27/07 REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer or Director (Please include corporate street list if listed directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
D	Manuel Fernandez	9405 Greenpoints Drive		Tampa, FL 33626	
D	Cosetta Gutierrez	2 Canfield Ave., #217		White Plains, NY 10601	
D	Eddie Correa	2500 Rymer Lane		San Jose, CA 95133	
S	Yvonne M. Zayas	70 Blackledge Drive		Colchester, CT 06415	
REINSTATEMENT 0807				RH	
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 807 or 817, 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 807.0401 or 817.0401, 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 contained in Chapter 110, 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: <i>[Signature]</i> CFO				214-596-9338	
SIGNATURE AND TYPE OR PRINT NAME OF SECRETARY OR DIRECTOR				Date	

FD-70 - 1/19/07 C.T. Spence, Dallas

Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT

NATIONAL SOCIETY OF HISPANIC M B A'S INCORPORATED

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