2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 15, 2010
Secretary of State

DOCUMENT# N00000002434

Entity Name: MINISTERIOS RESTAURACION MONTE DE LOS OLIVOS, INC.

Current Principal Place of Business:

6295 LAKE WORTH RD
GREENACRES, FL 33463 US

New Principal Place of Business:

1946 S CONGRESS AVE
WEST PALM BEACH, FL 33406 US

Current Mailing Address:

PO BOX 540984
GREENACRES, FL 33454 US

New Mailing Address:

FEI Number: 65-1003347 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERNANDEZ, HUGO ISMAD
6576 CONSTANCE ST
LAKE WORTH, FL 33467 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: HUGO I HERNANDEZ

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD
Name: ESCOBAR, INGRID C
Address: 2819 ALABAMA ST
City-St-Zip: WEST PALM BEACH, FL 334062824 US

Title: S
Name: MATEO, ANDREZ
Address: 5090 PALM HILL, #200
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: PD
Name: HERNANDEZ, HUGO I
Address: 6576 CONSTANCE ST
City-St-Zip: LAKE WORTH, FL 33467 US

Title: S
Name: HERRERA, OMER
Address: 25 MARMAC DR
City-St-Zip: LAKE WORTH, FL 33461 US

Title: D
Name: TURCIO, DANIEL
Address: 5607 HAVER FEDERAL WAY
City-St-Zip: LAKE WORTH, FL 33463 US

Title: D
Name: HERNANDEZ, NORMA
Address: 2899 ALABAMA ST
City-St-Zip: W PALM BEACH, FL 33463

I hereby 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 all other like empowered.

SIGNATURE: INGRID C ESCOBAR T 11/15/2010

Electronic Signature of Signing Officer or Director — Date