

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000002906

FILED
Apr 29, 2008
Secretary of State

Entity Name: LATIN AMERICAN COOPERATIVE OF MULTIPLE SERVICES COOPLASMU INC.

Current Principal Place of Business:

10921 N.W. 26 AV
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

10921 N.W. 26 AV
MIAMI, FL 33167

New Mailing Address:

FEI Number: 65-1148886 **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:

BAUTISTA MORA, JUAN
10921 N.W. 26 AV
MIAMI, FL 33167 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: BAUTISTA MORA, JUAN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BAUTISTA MORA, JUAN
Address: 10921 N.W. 26 AV
City-St-Zip: MIAMI, FL 33167

Title: DVP () Delete
Name: ANDERSON, S. MORA
Address: 360 W. 19TH STREET
City-St-Zip: HIALEAH, FL

Title: DT () Delete
Name: SANCHEZ, FIORDALIZA
Address: 1700 NW 112 TERRACE
City-St-Zip: MIAMI, FL 33167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: DAVID, RODRIGUEZ
Address: 2331 NW 10TH AVENUE #106
City-St-Zip: MIAMI, FL 33127

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: JUAN B. MORA

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date