

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000008389

FILED
Mar 13, 2006
Secretary of State

Entity Name: FLORIDA REGIONAL INTERFAITH/INTERAGENCY EMERGENCY NETWORK IN DISASTERS, INC.

Current Principal Place of Business:

5400 NW 22 AVENUE
STE 706
MIAMI, FL 33142 US

New Principal Place of Business:

16201 SW 95TH AVENUE
SUITE 105
MIAMI, FL 33142 US

Current Mailing Address:

5400 NW 22 AVENUE
STE 706
MIAMI, FL 33142 US

New Mailing Address:

16201 SW 95TH AVENUE
STE 105
MIAMI, FL 33142 US

FEI Number: 65-1072769 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

REMALY, LESLI
14940 SW 153 STREET
STE 300
MIAMI, FL 33187 US

Name and Address of New Registered Agent:

VON WERNE, BETH
14940 SW 153 STREET,
SUITE 105
MIAMI, FL 33142 US

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: BVW

03/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PF () Delete
Name: REMALY, LESLI
Address: 14940 SW 153 STREET
City-St-Zip: MIAMI, FL 33187

Title: VD () Delete
Name: ZALDOUT, SOFIAN
Address: 183 NE 166 STREET
City-St-Zip: MIAMI, FL 33162

Title: D () Delete
Name: WILLEY, TOM
Address: P.O. BOX 35-2800
City-St-Zip: MIAMI, FL 331352800

Title: D () Delete
Name: BROWN, JIMMIE
Address: 2001 NW 35 STREET
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: CAMERON, LYNNE
Address: 8900 NW 18 TERRACE
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: NETTER, BRUCE
Address: 5400 NW 22 AVE STE 706
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change () Addition
Name: VON WERNE, BETH
Address: 14940 SW 153 STREET, SUITE 105
City-St-Zip: MIAMI, FL 33142

Title: TD (X) Change () Addition
Name: SALEM, MICHAEL
Address: 1651 WEST 37 STREET, SUITE 406
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Change () Addition
Name: DAVIS, GREGG
Address: 2150 SW 8TH STREET
City-St-Zip: MIAMI, FL 33135

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

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

Title: D (X) Change () Addition
Name: PEREZ, RICHARD
Address: 300 N KROME AVE # 12
City-St-Zip: FLORIDA CITY, FL 33034

I hereby certify that the information supplied with this filing does not qualify for the 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: MS

TD

03/13/2006

Electronic Signature of Signing Officer or Director

Date