

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 JUL 31 AM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000004294

1. Corporation Name

United Hispanic Union
All, All Against The Lead, Inc

2. Principal Office Address - No P.O. Box #

Theophilo Mansur St.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

#315

Suite, Apt. #, etc.

Same

City & State

Kissimmee Florida

City & State

Same

Zip

34743

Country

Osceola

Zip

Same

Country

Same

REINSTATEMENT

W070000034224
CR2E081 (1/07)

**4. Date Incorporated or Qualified
To Do Business in Florida**

June 19, 2001

5. FEI Number

65-1082843

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$975 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Jason Gonzalez

Street Address (P.O. Box Number is Not Acceptable)

Theophilo Mansur St

Suite, Apt. #, Etc.

#315

City

Kissimmee

State

FL

Zip Code

34743

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date July 9 2007

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Billian A DeRosa	315 Theophilo Mansur St.	Kissimmee Fl 34743
Dir.	Frank Santiago	315 Theophilo Mansur St	Kissimmee Fl 34743
Trea.	Ryan Gonzalez	315 Theophilo Mansur St	Kissimmee Fl 34743

200106978272
07/31/07-01021-020 **358.75

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 607 or 617, 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 607.0401 or 617.0401, 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 119, 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:

Frank Santiago / Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 9 2007

407-624-4431

Date

Daytime Phone #