2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000005328

FILED Oct 09, 2007 Secretary of State

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Entity Na	me: LOS CAMINOS DE ISRAEL, INC.			
Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
P O BOX 813506 HOLLYWOOD, FL 33081		2221 N 46TH AVE HOLLYWOOD, FL 33021		
Current Mailing Address:		New Mailing Address:		
P O BOX 8 HOLLYWO	313506 DOD, FL 33081			
	: 65-1125594 FEI Number Applied For (ce with s. 607.193(2)(b), F.S., the corporation		Desired ()	
Name and	Address of Current Registered Age	nt: Name and Address of New Registered A	gent:	
ZAYAS, AI 625 75 ST MIAMI BEA				
	named entity submits this statement fo e of Florida.	r the purpose of changing its registered office or registered	agent, or both,	
SIGNATU	RE: ZAYAS, ARIEL			
	Electronic Signature of Registere	ed Agent Date		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete OTERO, MARIANO 2221 N 46TH AVENUE HOLLYWOOD, FL 33021	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	SEC () Delete OTERO, RUTH N 2221 N 46TH AVENUE HOLLYWOOD, FL 33021	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	VP () Delete ALBO, JORGE 2221 N 46 AVE HOLLYWOOD, FL 33021	Title: () Change () Addition Name: Address: City-St-Zip:		
Title:	D () Delete	Title: () Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARIANO OTERO PRES 10/09/2007

SALAZAR LOEWE, JUAN C RABBI

N.MIAMI BAEACH, FL 33162

18140 NE 10TH AVE

Name:

Address:

City-St-Zip: