## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000003504

Entity Name: CIUDAD REFUGIO, INC.

FILED Oct 08, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4114 S GOLDENROD RD ORLANDO, FL 32822

**Current Mailing Address: New Mailing Address:** 

PO BOX 570745 ORLANDO, FL 328570745

FEI Number: 45-0475518 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: Name and Address of New Registered Agent:

CARRION, RIGOBERTO CARRION, RIGOBERTO 1725 MONTEBURG DR 7470 CHELSEA HORBOUR DR US ORLANDO, FL 32825 ORLANDO, FL 32829

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: RIGOBERTO CARRION 10/08/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete CARRION, RIGOBERTO CARRION, RIGOBERTO Name: Name: 1725 MONTEBURG DR Address: 7470 CHELSEA HORBOUR DR Address: City-St-Zip: ORLANDO, FL 328255548 City-St-Zip: ORLANDO, FL 32829

Title: ( ) Delete Title: () Change () Addition Name: GARCIA, NOEL A Name:

Address: 10319 CYPRESS TRAIL DR Address: City-St-Zip: ORLANDO, FL 328255043 City-St-Zip:

WINTER PARK, FL 327928905

Title: () Delete Title: (X) Change ( ) Addition REYES, SONIA Name: REYES, SONIA Name:

1725 MONTEBURG DR 7470 CHELSEA HORBOUR DR Address: Address:

City-St-Zip: ORLANDO, FL 328255548 City-St-Zip: ORLANDO, FL 32829

Title:  $\top$ () Delete Title: () Change () Addition Name: VARGAS, MARTIN Name: 4063 N GOLDENROD RD STE 2 Address: Address:

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.

City-St-Zip:

SIGNATURE: RIGOBERTO CARRION TP 10/08/2007