

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

10 MAY 17 PM 12:59

DOCUMENT # N02000003814

1. Corporation Name

Human Rights and National Reconciliation Cuban Commission, Inc.

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

200 S. Biscayne Blvd.

Suite, Apt. #, etc.

Ste 3810

City & State

Miami, Florida

Zip

33131

Country

USA

3. Mailing Office Address

200 S. Biscayne Blvd.

Suite, Apt. #, etc.

Ste 3810

City & State

Miami, Florida

Zip

33131

Country

USA

100180501291
05/06/10--01041--016 **297.50

REINSTATEMENT 08-10

4. Date Incorporated or Qualified
To Do Business in Florida 05/17/2002

5. FEI Number
20-0103298

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Gutierrez & Associates, P.L.

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

200 S. Biscayne Blvd.

Suite, Apt. #, Etc.

Ste 3810

City

Miami

State

FL

Zip Code

33131

☐ 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.

100180501291
05/17/10--01060--025 **61.25

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

[Signature]
REGISTERED AGENT MUST SIGN

Date 4-30-10

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
DPS	PEREZ, JORGE	19831 SW 81 Court	Cutler Bay, FL 33189
D	RODRIGUEZ, MARIA ELENA	11 McKenzie Ave., Apt 2	East Rutherford, NJ 07073
D	AGUILERA, SUSAN A.	14280 SW 133 Ave.	Miami, FL 33186

10. E-mail Address: LNG@MARTLAW.COM

(To be used for future annual report notification)

11. 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. I further certify, 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: *[Signature]*

JORGE PEREZ

4/30/2010

305-607-8701

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #