## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000006932

Entity Name: "YO SOY EL QUE SOY" CORPORATION

FILED Dec 07, 2005 Secretary of State

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

150 NW 96 AVE. 1101 COLONY POINT CIR

APT. 102 **APT 122** 

PEMBORKE PINES, FL 33024 PEMBORKE PINES, FL 33026

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

1101 COLONY POINT CIR 150 NW 96 AVE.

APT. 122 APT. 102

PEMBORKE PINES, FL 33026 PEMBORKE PINES, FL 33024

FEI Number: 82-0564095 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:

CORONA, FELIPE R CORONA, FELIPE R 150 NW 96 AVE. 1101 COLONY POINT CIR

APT. 102 APT. 122

PEMBORKE PINES, FL 33024 US PEMBROKE PINES, FL 33026 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: FELIPE CORONA 12/07/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

LOBO, ANTONIO LOBO, ANTONIO Name: Name: 150 NW 96 AVE. Address: 1101 COLOY POINT CIR APT 122 Address:

City-St-Zip: PEMBORKE PINES, FL 33024 City-St-Zip: PEMBORKE PINES, FL 33026

Title: () Delete Title: (X) Change ( ) Addition MONTESDEOCA, MARLENE Name: MONTESDEOCA, MARLENE Name: Address: 150 NW 96 AVE., APT 102 Address: 1101 COLONY POINT CIR APT 122 City-St-Zip: PEMBORKE PINES, FL 33024 City-St-Zip: PEMBORKE PINES, FL 33026

Title: () Delete Title: (X) Change ( ) Addition

GARCIA, JOSE A Name: GARCIA, JOSE A Name:

1101 COLONY POINT CIR APT 122 Address: 150 NW 96 AVE. Address: City-St-Zip: PEMBORKE PINES, FL 33024 City-St-Zip: PEMBORKE PINES, FL 33026

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Ρ SIGNATURE: ANTONIO LOBO 12/07/2005