## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000008899

Entity Name: RELIEF FOR LIFE FOUNDATION, INC.

FILED Jun 30, 2007 Secretary of State

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

350 LINCOLN RD., SUITE 412 MIAMI BCH, FL 33139

Current Mailing Address: New Mailing Address:

350 LINCOLN RD., SUITE 412 MIAMI BCH, FL 33139

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

LORA, JULIO C 350 LINCOLN RD., SUITE 412 MIAMI BCH, FL 33139 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: JULI LORA

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition
Name: LORA, JULIO C Name:
Address: 350 LINCOLN RD., SUITE 412 Address:

 Address:
 350 LINCOLN RD., SUITE 412
 Address:

 City-St-Zip:
 MIAMI BCH, FL 33139
 City-St-Zip:

Name: DUQUELA, OSIRIS Name: FOX, JOSEPH

Address: 350 LINCOLN ROAD SUITE 412 Address: 350 LINCOLN ROAD SUITE 412 City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LORA, DIEGO
 Name:

 Address:
 350 LINCOLN ROAD SUITE 412
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

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

 Name:
 LORA, JULIO
 Name:
 VALBUENA, KATLEEN

 Address:
 350 LINCOLN RD., SUITE 412
 Address:
 350 LINCOLN RD., SUITE 412

 City-St-Zip:
 MIAMI BCH, FL 33139
 City-St-Zip:
 MIAMI BCH, FL 33139

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GOODMAN, PÉTER
 Name:

 Address:
 350 LINCOLN ROAD SUITE 412
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

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

 Name:
 Name:
 PEREZ, POMPOSA

 Address:
 Address:
 350 LINCOLN ROAD SUITE 412

 City-St-Zip:
 City-St-Zip:
 MIAMI BEACH, FL 33139

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.

SIGNATURE: JULIO LORA PD 06/30/2007