

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000001293

FILED  
Nov 10, 2009  
Secretary of State

Entity Name: ALGO NUEVO INCORPORATED

**Current Principal Place of Business:**

412 N.W. 11TH AVENUE  
MIAMI, FL 33128

**New Principal Place of Business:**

**Current Mailing Address:**

1609 S.W. 57TH AVENUE  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number: 56-2322812      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:**

LOPEZ, MARIA B  
412 N.W. 11TH AVENUE  
MIAMI, FL 33128      US

**Name and Address of New Registered Agent:**

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: MARIA B LOPEZ

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD      ( ) Delete  
Name: LOPEZ, MARIA B  
Address: 412 N.W. 11TH AVENUE  
City-St-Zip: MIAMI, FL 33128

Title: VPD      ( ) Delete  
Name: DIMINGO, ROBERTO  
Address: 412 N.W. 11TH AVENUE  
City-St-Zip: MIAMI, FL 33128

Title: TD      ( ) Delete  
Name: LOPEZ, JUAN  
Address: 412 N.W. 11TH AVENUE  
City-St-Zip: MIAMI, FL 33128

Title: VPD      ( ) Delete  
Name: LOPEZ, MARICARMEN  
Address: 412 N.W. 11TH AVENUE  
City-St-Zip: MIAMI, FL 33128

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARIA B LOPEZ

PSD

11/10/2009

Electronic Signature of Signing Officer or Director

Date