

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 MAR 27 AM 10:22

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03000001799

1. Corporation Name

STINGAREE CENTENNIAL FOUNDATION CO.

2. Principal Office Address

1445 SW 13 Street

3. Mailing Office Address

1445 SW 13 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip
33145

Country

Miami-Dade

Zip
33145

Country

Miami-Dade

REINSTATEMENT
CR2E081 (12/05)

04-06

4. Date Incorporated or Qualified
To Do Business in Florida

March 3, 2003

5. FEI Number

35-2212022

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

Diana Morales

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

1445 SW 13 Street

Suite, Apt. #, Etc.

City

Miami,

State
FL

Zip Code

33145

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

Diana Morales

Date

3/25/06

REGISTERED AGENT MUST SIGN

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
P	Diana Morales	1445 SW 13 Street	Miami, FL 33145
VP	Richard De Agüero	1200 SW 17th Terrace	Miami, FL 33135
S	Maidilyn Falcon-Hernandez	216 NW 56th Avenue	Miami, FL 33126

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04/05/06--01032--001 **358.75

10. 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 and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. 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:

Diana Morales

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/06

Date

786 457-4260

Daytime Phone #