

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000008081

FILED
Apr 11, 2005
Secretary of State

Entity Name: CENTRO INTERNACIONAL DE RESTAURACION, INC.

Current Principal Place of Business:

7130 PEMBROKE ROAD
MIRAMAR, FL 33023

New Principal Place of Business:

6230 SW 27TH STREET
MIRAMAR, FL 33023

Current Mailing Address:

7130 PEMBROKE ROAD
MIRAMAR, FL 33023

New Mailing Address:

6230 SW 27TH ST.
MIRAMAR, FL 33023

FEI Number: **FEI Number Applied For (X)** **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:

GEUNA, OMAR R
6230 S.W. 27TH STREET
MIRAMAR, FL 33023 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: OMAR GEUNA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GUENA, OMAR R
Address: 6230 S.W. 27TH STREET
City-St-Zip: MIRAMAR, FL 33023

Title: SD () Delete
Name: GUENA, HILDA
Address: 6230 S.W. 27TH STREET
City-St-Zip: MIRAMAR, FL 33023

Title: TD (X) Delete
Name: CARPIO, EVELYN
Address: 6230 S.W. 27TH STREET
City-St-Zip: MIRAMAR, FL 33023

Title: D () Delete
Name: MOGGIO, RODOLFO O
Address: 912 S.W. 62ND AVENUE
City-St-Zip: HOLLYWOOD, FL 33023

Title: D (X) Delete
Name: VAUJIN, JOSE
Address: 1511 NORTH 68TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33024

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:

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

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.

SIGNATURE: OMAR GEUNA

PD

04/11/2005

Electronic Signature of Signing Officer or Director

Date