## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000009140

FILED Jan 26, 2007 Secretary of State

Entity Name: LIRIO DEL LOS VALLES DE HOLLYWOOD, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4080 NW 165TH STREET OPA-LOCKA, FL 33054 **Current Mailing Address: New Mailing Address:** 4080 NW 165TH STREET OPA-LOCKA, FL 33054 FEI Number: 20-0350210 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: FABIO, HERBERT 4080 NW 165TH STREET OPA-LOCKA, FL 33054 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: FABIO HERBERT Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete RODRIGUEZ, MARTHA Name: Name: Address: 19840 NW 43RD CT Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ANTONIO, JULIANA Name: Address: 6122 SW 34TH STREET Address: City-St-Zip: MIRAMAR, FL 33023 City-St-Zip: Title: DS () Delete Title: () Change () Addition MAZARIEGOS, ELVIN Name: Name: 8670 JOHNSON STREET Address: Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: ( ) Delete Title: DT Title: () Change () Addition MEJIA EGOS, PATRICIA Name: Name: 7300 NW 1ST STREET BLDG 6 #202 Address: Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ELVIN MAZARIEGOS DS 01/26/2007