## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000009292

Name:

Address:

City-St-Zip:

FILED Sep 17, 2007 Secretary of State

Entity Name: SOUTH FLORIDA CARIBBEAN RENAISSANCE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7905 SW 7TH PLACE NORTH LAUDERDALE, FL 33068 US **Current Mailing Address: New Mailing Address:** 7905 SW 7TH PLACE PO BOX 590803 NORTH LAUDERDALE, FL 33068 US FORT LAUDERDALE, FL 33359 US FEI Number: 20-0464659 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: DAVIS, TERRENCE A 7905 SW 7TH PLACE NORTH LAUDERDALE, FL 33068 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: TERRENCE DAVIS Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete DAVIS, DANIELE A DAVIS, TERRENCE A Name: Name: 7905 SW 7TH PLACE Address: 7905 SW 7TH PL Address: City-St-Zip: NORTH LAUDERDALE, FL 33068 US City-St-Zip: NORTH LAUDERDALE, FL 33068 US Title: () Delete Title: (X) Change ( ) Addition JACKSON, MARCIA Name: BURKE, DALTON Name: Address: 3616 NW 37TH STREET Address: 3281 NW 64TH ST FORT LAUDERDALE, FL 33309 City-St-Zip: LAUDERDALE LAKES, FL 33309 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition NEWMAN, MONIQUE MCPHERSON-GORDON, SOPHIA Name: Name: Address: P. O. BOX 772333 Address: 3390 NW 18TH PL City-St-Zip: CORAL SPRINGS, FL 33077 City-St-Zip: FORT LAUDERDALE, FL 33311 Title: Title: PRO ( ) Change (X) Addition ( ) Delete Name: Name: KERR, KIMANI Address: Address: 3390 NW 18TH PL City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33311 Title: () Delete Title: ( ) Change (X) Addition

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.

Name:

Address:

City-St-Zip:

WILKINS, KERRY ANN

LAUDERHILL, FL 33319

7340 NW 52ND CT

SIGNATURE: TERRENCE DAVIS D 09/17/2007