2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010005

Entity Name: EUROPEAN IMMIGRATION AND TRANSLATION LEGAL AID, INC.

Oct 20, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

% GRANT KAPLAN 200 DIPLOMAT PRKWY 7200 W. CAMINO REAL #102 523

BOCA RATON, FL 33433 HALLANDALE, FL 33009

Current Mailing Address: New Mailing Address:

% GRANT KAPLAN 200 DIPLOMAT PRKWY 7200 W. CAMINO REAL #102 BOCA RATON, FL 33433 HALLANDALE, FL 33009

FFI 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: Name and Address of New Registered Agent:

FILINGS, INC SORSHER, ALEX

3732 N.W. 16TH STREET 2500-1 N STATE ROAD 7 FT. LAUDERDALE, FL 333114132 US HOLLYWOOD, FL 33021 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: ALEX SORSHER 10/20/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MOCHKAROVSKY, BAGRAT MOCHKAROVSKY, BAGRAT Name: Name: % GRANT KAPLAN 7200 W CAMINOL REAL #102 Address: 200 DIPLOMAT PRKWY #523 Address:

City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: HALLANDALE, FL 33009

Title: Title: (X) Change () Addition () Delete Name: HAMBARDZUMYAN, VAHAGN Name: HAMBARDZUMYAN, VAHAGN Address: % GRANT KAPLAN 7200 W CAMINOL REAL #102 Address: 200 DIPLOMAT PRKWY #523

City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: HALLANDALE, FL 33009

Title: () Delete Title: (X) Change () Addition HAMBARDZUMYAN, NATALYA Name: HAMBARDZUMYAN, NATALYA Name:

% GRANT KAPLAN 7200 W CAMINOL REAL #102 200 DIPLOMAT PRKWY #523 Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: HALLANDALE, FL 33009

Title: () Delete Title: () Change (X) Addition

Name: Name: SAKEVICH, MARINA 200 DIPLOMAT PRKWY #523 Address: Address: City-St-Zip: City-St-Zip: HALLANDALE, FL 33009

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: BAGRAT MOCHKAROVSKY D 10/20/2004