2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jun 22, 2006
Secretary of State

DOCUMENT# N04000000076

Entity Name: BUENA VISTA HEIGHTS NEIGHBORHOOD IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

4185 NW 1 AVE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

4185 NW 1 AVE
MIAMI, FL 33127

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

IVORY, NIKITA
5400 NW 22 AVE, #704
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

IVORY, NIKITA
200 S. BISCAYNE BLVD., #2929
MIAMI, FL 33131 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: NIKITA IVORY 06/22/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ANDRE, EVELYN
Address: 4185 NW 1 AVE
City-St-Zip: MIAMI, FL 33127

Title: V ( ) Delete
Name: ANDRE, CHRISTINE
Address: 4185 NW 1 AVE
City-St-Zip: MIAMI, FL 33127

Title: S (X) Delete
Name: ALCE, CATHY
Address: 4185 NW 1 AVE
City-St-Zip: MIAMI, FL 33127

Title: T (X) Delete
Name: TRINCERI, LEONARD
Address: 4500 N MIAMI AVE
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: ANDRE, CHRISTINE
Address: 4185 NW 1 AVE
City-St-Zip: MIAMI, FL 33127

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 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: EVELYN ANDRE P 06/22/2006
Electronic Signature of Signing Officer or Director Date