2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000008209

Entity Name: FUNDACION NUEVA GENERACION INC.

FILED Oct 06, 2005 Secretary of State

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

Current Mailing Address: New Mailing Address:

FEI Number: 77-0645929 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:

BARRIENTOS, NICOLE A

11801 N. E 6 AVE

BISCAYNE PARK, FL 33161 US

BARRIENTOS, VICTORIA
325 NE 129 ST

MIAMI, FL 33161 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: VICTORIA BARRIENTOS 10/06/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BARRIENTOS, ANDREA D
 Name:
 LEDEZMA, RUBEN

 Address:
 325 NE 129 ST
 Address:
 9523 NE 2ND AVE

 City-St-Zip:
 MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33138

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

 Name:
 BARRIENTOS, NICOLE A
 Name:
 CHACON, NANCY A

 Address:
 11801 NE 6 AVE
 Address:
 11 SIONIA AVE. APT 2

 City-St-Zip:
 BISCAYEN PARK, FL 33161
 City-St-Zip:
 MIAMI, FL 33134

 $\label{eq:title:SC} {\sf Title:} \qquad {\sf SC} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SC} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 MARQUEZ, VALERIA
 Name:
 BARRIENTOS, VICTORIA

 Address:
 425 SW 9 ST APT 5
 Address:
 325 NE 129 ST

Address: 425 SW 9 ST APT 5 Address: 325 NE 129 ST City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33161

 Name:
 CARDOSA, MONICA
 Name:
 HERNANDEZ, JENNY

 Address:
 11 SIONIA AVE. APT 2
 Address:
 1051 SW 1 ST APT 3 104

 City-St-Zip:
 MIAMI, FL 33134
 City-St-Zip:
 MIAMI, FL 33130

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: NANCY CHACON VP 10/06/2005