

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000008241

FILED  
Sep 21, 2005  
Secretary of State

Entity Name: DOUBLE EDGE ACADEMY, INC.

## Current Principal Place of Business:

19205 SW 185 COURT  
MIAMI, FL 33187

## New Principal Place of Business:

## Current Mailing Address:

19205 SW 185 COURT  
MIAMI, FL 33187

## New Mailing Address:

FEI Number: 20-0704818      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:

FABIO, DEBRA  
19205 SW 185 COURT  
MIAMI, FL 33187      US

## Name and Address of New Registered Agent:

EAGEN-ZORRILLA, CINDY  
19205 SW 185 COURT  
MIAMI, FL 33187      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: CINDY EAGEN ZORRILLA

09/21/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: ZORRILLA, JONATHAN E  
Address: 19205 SW 185 COURT  
City-St-Zip: MIAMI, FL 33187

Title: VS      ( ) Delete  
Name: EAGEN-ZORRILLA, CINDY  
Address: 19205 SW 185 COURT  
City-St-Zip: MIAMI, FL 33187

Title: T      ( ) Delete  
Name: FANJUL, ALEXANDER  
Address: 901 SPINNACKER COURT  
City-St-Zip: CHESAPEAKE, VA 23320

Title: D      ( ) Delete  
Name: GIL, DAMARIS  
Address: 5200 SW 69 AVENUE  
City-St-Zip: MIAMI, FL 33155

Title: D      ( ) Delete  
Name: CANAAN, YAMIL  
Address: 7542 SW 157 PL  
City-St-Zip: MIAMI, FL 33193

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: CINDY EAGEN ZORRILLA

VS

09/21/2005

Electronic Signature of Signing Officer or Director

Date