2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 07, 2007
Secretary of State

DOCUMENT# N04000011516

Entity Name: LATIN AMERICAN CENTER OF NEW MUSIC INC.

Current Principal Place of Business:

3230 SW 194 TERRACE
BROWARD, FL 33029

New Principal Place of Business:

Current Mailing Address:

3230 SW 194 TERRACE
BROWARD, FL 33029

New Mailing Address:

FEI Number: 20-2706579 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ-BARRIOS, ALBERTO
3230 SW 194 TERRACE
BROWARD, FL 33029 US

Name and Address of New Registered Agent:

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: ALBERTO PEREZ
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PEREZ-BARRIOS, ALBERTO
Address: 3230 SW 194 TERRACE
City-St-Zip: BROWARD, FL 33029

Title: VP ( ) Delete
Name: CARRENO, JUAN PABLO
Address: 5508 FLORENCE HARBOR DRIVE
City-St-Zip: ORLANDO, FL 32829

Title: S ( ) Delete
Name: LEAL, CESAR
Address: 14237 SW 111 LN
City-St-Zip: MIAMI, FL 33186

Title: T ( ) Delete
Name: PARADES, ARTURO
Address: 4740 SW 165 AVE
City-St-Zip: MIRAMAR, FL 33027

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:

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.

SIGNATURE: ARTURO PAREDES T 10/07/2007
Electronic Signature of Signing Officer or Director — Date