

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000002338

FILED
Apr 15, 2009
Secretary of State

Entity Name: CENTRO DE RESTAURACION LEVANTATE, INC.

Current Principal Place of Business:

5808 CONGRESS STREET
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

6713 OSTEEN RD.
59
NEW PORT RICHEY, FL 34653

Current Mailing Address:

P.O. BOX 1356
NEW PORT RICHEY, FL 34656

New Mailing Address:

6713 OSTEEN RD.
59
NEW PORT RICHEY, FL 34653

FEI Number: 41-2170061 FEI Number Applied For () FEI Number Not Applicable () 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:

ROSARIO, EDGARDO LUIS
6701-59 OSTEEN RD.
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

ROSARIO, EDGARDO LUIS
6701 OSTEEN RD.
59
NEW PORT RICHEY, FL 34653 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: EDGARDO LUIS ROSARIO

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: OCASIO, EDWIN
Address: 3117 LUDLOW DR.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DS () Delete
Name: ROSARIO, ROSA
Address: 6701 OSTEEN RD., STE. 59
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: DT () Delete
Name: OCASIO, JANET
Address: 3117 LUDLOW DR.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D (X) Delete
Name: ROSARIO, EDGARDO LUIS
Address: 6701 59 OSTEEN RD.
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSARIO, EDGARDO L
Address: 6701 OSTEEN RD.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TRES (X) Change () Addition
Name: ROSARIO, ROSA I
Address: 6701 OSTEEN RD., STE. 59
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: SEC (X) Change () Addition
Name: ZAPATA, BRENDA
Address: P.O BOX 1844
City-St-Zip: NEW PORT RICHEY, FL 34656

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: EDGARDO LUIS ROSARIO

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date