

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000002576

FILED  
Nov 10, 2008  
Secretary of State

**Entity Name:** RWANDA AMERICAN CHAMBER OF COMMERCE INC.

**Current Principal Place of Business:**

16401 N.W. 37TH AVE  
OPA LOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

MIAMI GARDENS P.O BOX 4914  
HIALEAH,, FL 33014

**New Mailing Address:**

**FEI Number:** 83-0425278      **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:**

**Name and Address of New Registered Agent:**

CHARLES, KASAANA  
16401 N.W. 37TH AVE  
OPA LOCKA, FL 33054      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: KASAANA CHARLES

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MUTONI, JOY  
Address: 16401 N.W. 37TH AVE  
City-St-Zip: OPA LOCKA, FL 33054

Title: D      ( ) Delete  
Name: JOSEPH, TONY  
Address: 15101 N.W. 67TH AVE  
City-St-Zip: MIAMI, FL 33014

Title: D      ( ) Delete  
Name: JOSEPH, PETER  
Address: 1501 N.W. 67TH AVE  
City-St-Zip: MIAMI, FL 33014

Title: D      ( ) Delete  
Name: KASAANA, CHARLES  
Address: 1640 NW 37 AVE  
City-St-Zip: OP-LOCKA,, FL 33054

**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: CHARLES KASAANA

D

11/10/2008

Electronic Signature of Signing Officer or Director

Date