

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000009535

FILED  
Sep 30, 2009  
Secretary of State

**Entity Name:** WORLD ASSOCIATION FOR PEACE, INC.

**Current Principal Place of Business:**

25 SE 2 AVE  
410  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

25 SE 2 AVE  
410  
MIAMI, FL 33131 US

**New Mailing Address:**

**FEI Number:** 35-2280366 **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:**

SUAREZ, VEGA & ASSOCIATES, INC.  
25 SE 2 AVE  
410  
MIAMI, FL 33131 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: SUAREZ, VEGA & ASSOCIATES, INC.

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: PERCUL GELFAND, EVA CLARA  
Address: AV. SANTA FE 4990 5TO'B'  
City-St-Zip: BUENOS AIRES, BA ARGENTINA

Title: D ( ) Delete  
Name: VEGA, JOSE M  
Address: 25 SE 2 AVE # 410  
City-St-Zip: MIAMI, FL 33131 FL

Title: D ( ) Delete  
Name: VEGA, CELIA  
Address: 25 SE 2 AVE # 410  
City-St-Zip: MIAMI, FL 33131 US

Title: D ( ) Delete  
Name: ROZEN, LAURA A  
Address: 8000 EAST DR # 211  
City-St-Zip: NORTH BAY VILLAGE, FL 33141 US

**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: EVA CLARA PERCUL GELFAND

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09/30/2009

Electronic Signature of Signing Officer or Director

Date