

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000002422

FILED
Oct 16, 2007
Secretary of State

Entity Name: POR AMOR AL NINO, INC.

Current Principal Place of Business:

2800 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32835

New Principal Place of Business:

2800 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

Current Mailing Address:

2800 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32835

New Mailing Address:

2800 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

FEI Number: 20-4588875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUSAKOS, MARINA
2800 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

JUSAKOS, LUZ M
2800 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805 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: LUZ M JUSAKOS

10/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JUSAKOS, LUZ M
Address: 2800 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32835

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JUSAKOS, LUZ M
Address: 2800 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32805

Title: V () Change (X) Addition
Name: SILVA, JOSEFINA
Address: 550 HISBISCUS RD
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Change (X) Addition
Name: TORO, FERNANDO
Address: 7558 NOLTON WAY
City-St-Zip: ORLANDO, FL 32822

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: LUZ M JUSAKOS

P

10/16/2007

Electronic Signature of Signing Officer or Director

Date