2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000005433

FILED Oct 06, 2009 Secretary of State

Entity Name: TEMPLO DE LA ALBANZA DE WEST PALM BEACH, INC.

Current Principal Place of Business: New Principal Place of Business:

5984 COCONUT DRIVE 3121 GULFSTREAM RD WEST PALM BEACH, FL 33413 LAKE WORTH, FL 33461

Current Mailing Address: New Mailing Address:

5984 COCONUT DRIVE 3121 GULFSTREAM RD WEST PALM BEACH, FL 33413 LAKE WORTH, FL 33461

FEI Number: 20-4910586 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:

ESQUILIN, JOSE E

5984 COCONUT DRIVE

WEST PALM BEACH, FL 33413 US

ESQUILIN, JOSE E

3121 GULFSTREAM RD

LAKE WORTH, FL 33461 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: JOSE E.ESQUILIN 10/06/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Address: 182 WOODLAND RD Address: 150 WALKER AVE
City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: GREEN ACRES, FL 33463

Title: T () Delete Title: T (X) Change () Addition Name: ROSA, JOSE ROSA, JOSE

Address: 182 WOODLAND RD Address: 1808 18TH LANE
City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: GREENACRES, FL 33463

 $\label{eq:title:sde} {\sf Title:} \qquad {\sf SD} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 ESQUILIN, JOSE E
 Name:
 ESQUILIN, JOSE E

 Address:
 5984 COCONUT DR
 Address:
 3121 GULFSTREAM RD

 City-St-Zip:
 WEST PALM BEACH, FL 33413
 City-St-Zip:
 LAKE WORTH, FL 33461

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: JOSE E.ESQUILIN PAST 10/06/2009