2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000010502

Entity Name: FAMILIA DE LA FE, INC.

FILED Jun 25, 2008 Secretary of State

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

6351 NW 201 ST. 1175 W 37 STREET MIAMI, FL 33015 HIALEAH, FL 33012

Current Mailing Address: New Mailing Address:

6351 NW 201 ST. 1175 W 37 STREET MIAMI, FL 33015 HIALEAH, FL 33012

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

CASTILLO, JESUS CABRERAS, REINOLD P
6351 NW 201 ST. 700 TAMIAMI BLVD
MIAMI, FL 33015 US MIAMI, FL 33144 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: REINOLD CABRERAS 06/25/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 CASTILLO, JESUS
 Name:
 CABRERAS, REINOLD

 Address:
 6351 NW 201 ST.
 Address:
 700 TAMIAMI BLVD

 Address:
 6351 NW 201 ST.
 Address:
 700 TAMIAMI BLVD

 City-St-Zip:
 MIAMI, FL 33015
 City-St-Zip:
 MIAMI, FL 33144

Title: D () Delete Title: D (X) Change () Addition Name: ROJAS, BARBARA Name: ROJAS, BARBARA

Address: 6351 NW 201 ST. Address: 7125 NW 186 STREET #B203

City-St-Zip: MIAMI, FL 33015 City-St-Zip: MIAMI, FL 33015

 Name:
 Name:
 PEREZ, JULIO C

 Address:
 Address:
 P.O BOX 940993

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33194

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: REINOLD CABRERAS P 06/25/2008