

# **2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N08000000077

**FILED**  
**Apr 30, 2014**  
**Secretary of State**

**Entity Name:** AMERICAN VETERANS ALLIANCE INC

**Current Principal Place of Business:**

13899 BISCAYNE BLVD,  
PH 4  
MIAMI, FL 33181 US

**New Principal Place of Business:**

**Current Mailing Address:**

6618 LEIGH RD  
ROCKY MOUNT, NC 27803 US

**New Mailing Address:**

**FEI Number:** 94-3432685

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MC GEE, WADDELL  
13899 BISCAYNE BLVD.  
PH4  
MIAMI, FL 33181 US

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

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: WADDELL MC GEE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: MARTINEZ, JOYNICOLE  
Address: 1923 SW 8TH ST  
City-St-Zip: MIAMI, FL 33135 US

Title: CHMN  
Name: MC GEE, WADDELL  
Address: 13899 BISCAYNE, BLVD. STE.PH4  
City-St-Zip: MIAMI, FL 33181 US

Title: DIR  
Name: KESSELE, GLORIA  
Address: 1923 SW 8TH ST  
City-St-Zip: MIAMI, FL 33135 US

I hereby 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 all other like empowered.

SIGNATURE: WADDELL MC GEE

CHMN

04/30/2014

Electronic Signature of Signing Officer or Director

Date