

**2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Nov 19, 2010  
Secretary of State**

DOCUMENT# N08000006715

Entity Name: CENTRO RESTAURACION A.R.D.E. INC.

**Current Principal Place of Business:**

43729 BEAR LAKE RD  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

43729 BEAR LAKE RD  
DELAND, FL 32720

**New Mailing Address:**

FEI Number: 26-2997712      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

RENTAS, HARRY SR  
43729 BEAR LAKE RD  
DELAND, FL 32720 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: HARRY RENTAS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RENTAS, HARRY SR  
Address: 1065 MCKENZIE RD  
City-St-Zip: LAKE HELEN, FL 32744

Title: VP  
Name: RENTAS, MARIA V  
Address: 1065 MCKENZIE RD  
City-St-Zip: LAKE HELEN, FL 32720

Title: OFF  
Name: MARIANI, JOSE SR  
Address: 43729 BEAR LAKE RD  
City-St-Zip: DELAND, FL 32720

Title: SEC  
Name: RENTAS, DEBBY  
Address: 1065 MCKENZIE RD  
City-St-Zip: LAKE HELEN, FL 32744

Title: OFF  
Name: CARRASQUILLO, ONEL  
Address: 43729 BEAR LAKE RD  
City-St-Zip: DELAND, FL 32720

Title: OFF  
Name: BELTRAN, JOSE L SR  
Address: 1065 MCKENZIE RD  
City-St-Zip: LAKE HELEN, FL 32744

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: HARRY RENTAS

P

11/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date