2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

APPROVEL

DOCUMENT # N40539
1. Entity Name
PARTIDO DEMOCRATA CRISTIANO DE CUBA

06 DEC -4 PM 5:31

PARTIDO	DEMOCRATA CRISTIA	NO DE C	UBA CORP.					SECRI	ETARY	of State , florida
Principal Plac 85 GRAND C MIAMI, FL 3		- P.O.	g Address BOX 558987 M, FL 33255					ivmv.	'E-LOOEE	, FLUNILIF
			Mailing Address PS GRAND CANAL DR.			E 1881 ILBE ELIE ELIE IL		I BIBII BIBII BIBII I	AJBII BIBIF BIBI	
Suite, Apt. #, etc.		Su	Suite, Apt. #, etc.			12012006 REII	N-NP	CR2E099	(11/05)	
City & Stat	grai. FLA	m_i^{ci}	ty & State : F	LA.		4. FEI Number 65-0231977	7			plied For t Applicable
3310	14 LSA.	7	3144	- Country-5	A.	5. Certificate of Sta	tus Desired	—————————————————————————————————————	8.75 Add	litional —
	6. Name and Address of Curr	ent Registere	nd Agent			7. Name and Addr	ess of New R	legistered Ag	jent	
GOMEZ, L	OURDES			Name						
	KELL AVE APT D 1907			Street	Address (F	P.O. Box Number is N	ot Acceptable	3)		
1910-31911, 1 L	55125							_		
				City				FL	Zip Cod	9
	named entity submits this statemen	nt for the purp	ose of changing its	registered office	or register	ed agent, or both, in t	ne State of Flo	orida. I am fai	miliar with,	and accept
the obligat	tions of registered agent.									
SIGNATURE	Signature, typed or printed name of registered a	nent and title if any	nicable (NOT	E: Registered Agent sig	natura mouin	ad when reinstation)		DATE		
		1	(1.01)		process require					
FILE NOW!!! FEE IS \$61.25 After January 1, 2007, Fee will be \$122.50			In accordance with s. 607.193(2)(b) corporation did not receive the prior), F.S., the Make check payable to rnotice. Florida Department of State				
		22.50	In accordar corporation	ce with s. 607.1 did not receive	193(2)(b), the prior	, F.S., the notice.				
	OFFICERS AND		corporation	did not receive	the prior	notice. ADDITIONS/CHANGE	Flor S TO OFFICE	ida Departn RS AND DIRE	CTORS IN	ate
After Jan 10.	OFFICERS AND		corporation	11.	the prior	notice. ADDITIONS/CHANGE	Flor S TO OFFICE	ida Departn RS AND DIRE	CTORS IN	10 Addition
After Jan	OFFICERS AND		corporation	did not receive	the prior	notice.	Flor S TO OFFICE	ida Departn RS AND DIRE	CTORS IN	10 Addition
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under each; that I am an officer or director of the corporation or the receiver or trustee emportance of execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other line empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/06 Date Daytime Phone #