PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1	RPORAT ISTATEN				Secretar	EPARTMENT OF STATE cretary of State on or corporations		FILED 03 OCT 21 AM 9: 06					
DOCUMENT # N9800003695 1. Corporation Name								SECRETARY OF STATE FALLAHASSEE, FLORIDA					
MASTER FRANK'S FOUNDATION FOR KIDS, INC.													
·									TAT				3
1					Office Address SW 42ND STREET		10/	3000 21/03-	2235 -01029	1622 010	86 **36	7.50	***
Suite, Apt. #, etc. Suite, Apt. #								4. Date incorporated or Qualified To Do Business in Florida 06/24/1998					
f ¥				City & State MIAMI,	City & State MIAMI, FL			Number App			ied For		
Zip 33175	Country		Zip 33175	1 ' 1 '		65-0845783 6. CERTIFICATE OF STATUS DESIRED ☑ S				Not Applicable 8.75 Additional Fee required for a Certificate of Status			
<u></u>	Ī	<u> </u>		7. 1	Name and A	Address of Current Regis	tered Agent						J
Name TERESITA OTERO													
	Street Address (P.O. Box Number is Not Acceptable) 11401 SW 40TH STREE							ET					
	Suite, Apt. #, Etc. STE, 201												
City MIAMI								State FL	Zip Code 33165				
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the ob								ion 607.05	05 or 617.050	03, F.S.		-	(10/02)
Signature of Registered Agent Guller					FAIT ABIOT COAL			Date10/08/03					R2E08
9. Names	s and Street A	ddresses		REGISTERED AG		ofit corporations must list a	t least 3 directors)						٦
Titles	Name of Officers and/or Directors				Street Address of Each Officer and/or Director			City / State / Zip					
P/D	RICHARD HERNANDEZ				13331 SW 42ND ST.			MIAMI, FL '33175					
V/D	RUDY CASTELLANO				13331 SW 42ND ST.			MIAMI, FL 33175					
V/D	FERNANDO TARIN				13331 SW 42ND ST.			MIAMI, FL 33175					
T/D	TERESITA OTERO				11401 SW 40TH ST.,STE 201			MIAMI, FL 331 6 5					
S/D	SUZEL ALVAREZ				13331 SW 42ND ST.			MIAMI, FL 33175					
D	FRANCISCO LOUREDA				13331 SW 42ND ST.			MIAMI, FL 33175					
this rei	instatement ap by the corpora	plication, tion have	the reason for di been paid and th	ssolution has been e names of individ	n eliminated Iuais listed d	o execute this application a , the corporate name satis on this form do not qualify e legal effect as if made u	fies the requirement or an exemption und	s of section	607.0401 or	617.0401, F.	S., that a	il fees	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-229-5272

Daytime Phone #

10/08/03

Date