2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0018459

DOCUMENT # N98000004073

FILED

03 NOV -3 AM 9:04

SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. Entity Name

CENTRO INTERNACIONAL DE ALABANZA NORTE, INCORPOR ATED

Principal Place of Business	Mailing Address
14100 PALMETTO FRONTAGE RD SUITE 106 MIAMI LAKES FL 33016	14100 PALMETTO FRONTAGE RD SUITE 106 MIAMI LAKES FL 33016

REINSTATEMENT

CHECK HERE IF MAKING CHANGES ☐

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0849433 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BARRERA, HERNAN 14100 PALMETTO FRONTAGE RD SUITE 106 MIAMI LAKES FL 33016	Name: JAIME, JULIO Street Address (P.O. Box Number is Not Acceptable): 14100 Palmetto Frontage Rd. Suite 106. City: Miami Lakes FL Zip Code: 33016.

8. 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. I am familiar with, and accept the obligations of registered agent.

300023611833
10/07/03--01037--010 **70.00

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BARRERA, HERNAN 5420 SW 130 AVENUE MIRAMAR FL 33027	☒ Delete	DP JAIME, JULIO 6930 NW 177 St. O103 Miami, FL 33015	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS BARRERA, MICHELLE 5420 SW 130 AVENUE MIRAMAR FL 33027	☒ Delete	DS JAIME, CLAUDIA. 6930 NW 177 St. O 103 Miami, FL 33015	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV JAIME, JULIO 2690 W 76TH ST #104 HIALEAH FL 33016	☐ Delete	DV ABAD, JORGE G. 6962 NW 179 St. Ap. 211 Miami, FL 33015	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JAIME, CLAUDIA 2690 W 76TH STREET HIALEAH FL 33016	☐ Delete	D ABAD, YENISET 6962. NW 179 St. Ap 211 Miami, FL 33015.	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	100024389421 11/03/03--01102--025 **175.00	☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #