## 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N99000004323

FILED Oct 31, 2004 Secretary of State

Entity Name: THE NICARAGUAN ASSOCIATION, OF PALM BEACH COUNTY INC.

**Current Principal Place of Business: New Principal Place of Business:** 4111 VICLIFF ROAD WEST PALM BEACH, FL 33406 **Current Mailing Address: New Mailing Address:** P.O.B0X 19955 4978 PIMLICO CT WEST PALM BEACH, FL 33415 WEST PALM BEACH, FL 33416 FEI Number: 65-0945141 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VASQUEZ, JUAN O 411 VICLIFF RD WEST PALM BEACH, FL 33406 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition VASQUEZ, JUAN VASQUEZ, JUAN Name: Name: 4111 VICLIFF ROAD Address: 4111 VICLIFF ROAD Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33406 Title: () Delete Title: (X) Change ( ) Addition LUCIA, MORALES Name: LUCIA, MORALES Name: Address: 610 WINTER STREET. Address: 4978 PIMLICO CT City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: WEST PALM BEACH, FL 33406 Title: () Delete Title: (X) Change ( ) Addition FLORES, JUANA MONTANO, HEIDY Name: Name: 5018 CLEVELAND ROAD 201 E SHANNANDALE RD Address: Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: WEST PALM BEACH, FL 33406 Title: ( ) Delete Title: (X) Change ( ) Addition Name: MORALES, OSCAR JR Name: MORALES, OSCAR JR Address: 4879 PIMLICO CT Address: 4978 PIMLICO CT City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33415 Title: () Delete Title: () Change () Addition BAEZ, SYLVIA Name: Name: 729 FRANCIS STREET Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: Title: () Delete Title: () Change () Addition BAF7 ROGER Name: Name: Address: 729 FRANCIS STREET Address: WEST PALM BEACH, FL 33406 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JUAN O VASQUEZ VP 10/31/2004