

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N9900000514

FILED
Mar 01, 2007
Secretary of State

Entity Name: NINOS HACIA EL FUTURO, INC.

Current Principal Place of Business:

605 OAKS DR., #904
POMPANO BEACH, FL 33069

New Principal Place of Business:

122 VIA MILAN TERRACE
DAVIE, FL 33325 US

Current Mailing Address:

605 OAKS DR., #904
POMPANO BEACH, FL 33069

New Mailing Address:

P.O. BOX 602
13762 STATE ROAD 84
DAVIE, FL 33325 US

FEI Number: 65-0950177 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RUIZ, ALFONSO
605 OAKS DR., #904
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

MONIQUE TRONCONE, CPA P.A.
55 N.E. 5TH AVENUE
SUITE 501
BOCA RATON, FL 334325500 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: MONIQUE TRONCONE

03/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRACIELA MARTINEZ, MARIA
Address: P.O. BOX 590111
City-St-Zip: FT. LAUDERDALE, FL 33359

Title: D (X) Delete
Name: RUIZ, ALFONSO
Address: 605 OAKS DRIVE #904
City-St-Zip: POMPANO BEACH, FL 33069

Title: DS (X) Delete
Name: SALAZAR, PATRICIA
Address: 605 OAKS DR., #904
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TODD, SAMUEL
Address: 4475 SOUTHERN BLVD
City-St-Zip: WEST PALM, FL 33406 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SAMUEL TODD

PD

03/01/2007

Electronic Signature of Signing Officer or Director

Date