2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000023827

Entity Name: FUNDACION PORVENIR INC.

FILED Dec 11, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13170 SW 128TH STREET, #202 106 GLENBRIAR CT

MIAMI, FL 33186 SIMPSONVILLE, SC 29681

Current Mailing Address: New Mailing Address:

2315 NW 107 AVE 106 GLENBRIAR CT

SUITE 1M32, BOX 32 SIMPSONVILLE, SC 29681 MIAMI, FL 33172

FEI Number: 65-1120088 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:

OLAVE, CARLOS F 2315 NW 107 AVE SUITE 1M32, BOX 32 MIAMI, FL 33172 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: CARLOS F. OLAVE

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: OLAVE, CARLOS F Name: OLAVE, CARLOS F

 Natire
 STATE (AND LOCK)

 Address:
 5225 NW 112 AVE., #3
 Address:
 106 GLENBRIAR CT

 City-St-Zip:
 MIAMI, FL 33138
 City-St-Zip:
 SIMPSONVILLE, SC 29681

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 SILVIA, DIANA
 Name:
 SILVA, DIANA

 Address:
 5225 NW 112 AVE., #3
 Address:
 106 GLENBRIAR CT

 City-St-Zip:
 MIAMI, FL 33138
 City-St-Zip:
 SIMPSONVILLE, SC 29681

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS F. OLAVE P 12/11/2006