## 2007 FOR PROFIT CORPORATION REINSTATEMENT

٠...

DOCUMENT # P03000073  1. Entity Name GRG HISPANIC, INC.	3353		2007 MAR -	3 PM 3: 02
Principal Place of Business  2121 PONCE DE LEON BOULEVARD SUITE 400 CORAL GABLES, FL 33134  Mailing Address  2121 PONCE DE LEON BOULEVARD SUITE 400 CORAL GABLES, FL 33134		SECRETARY OF STATE TALLAHASSEE FLORIDA		
2. Principal Place of Business - No P.O. Box # 2 P 1 OAK AJENUE Suite, Apt. #, etc.	3. Mailing Address  2801 OAK  Suite, Apt. #, etc.	AVENUE	02092007 REIN-P	CR2E098 (1/07)
COLONUT GROVE FL Zip Country	City & State COCONUT 6	AQUE FC	4. FEI Number 83-0364555	Applied For Not Applicable \$8.75 Additional
2ip Country 33133 M(AMI-DADE 6. Name and Address of Current	Zip 33133 Registered Agent	MIAMI-DADA	Certificate of Status Desire     Name and Address of Nev	Fee Required
BILBAO, KELTSE  2871 OAK AVENUE  COCONUT GROVE, FL 33133			P.O. Box Number is Not Acceptable)  OAK  HUZNUE	
		Evoce N	JT GROVE	FL Zip Code 38 ( 3 3
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.  SIGNATION  WORKS ARCAZAR, PRESIDENT 2/9/07				
SIGNATURE Signature, typed or printed name of registered agent and like if applicable (NOTE: Registered Agent signature required when reinstating)  DATE				
FILE NOW!!! FEE IS \$300.00				e with s. 607.193(2)(b), F.S., the did not receive the prior notice.
10. OFFICERS AND	DIRECTORS Delete	11.	ADDITIONS/CHANGES TO C	DFFICERS AND DIRECTORS IN 11  Change Addition
NAME ALCAZAR, MONICA A STREET ADDRESS CITY-ST-ZIP COCONUT GROVE, FL 33133		NAME STREET ADDRESS CITY-ST-ZIP	1 9 9 9 5 94/95/97919	5819261 06014 **308.75
NAME BILBAO, KELTSE STREET ADDRESS 2871 OAK AVENUE	Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP COCONUT GROVE, FL 33133	☐ Delete	CITY-ST-ZIP TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME	□ <b>-</b>			
STREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addilion
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Change ☐ Addition ☐ Change ☐ Addition
CITY-ST-ZIP  TITLE  NAME		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Delete  Delete  this filing does not qualify fo true and accurate and that newered to execute this report	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  r the exemptions containe ny signature shall have the as required by Chapter 60	same legal effect as if made und	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition