## 2014 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P13000086535

Entity Name: C. I. C. A. INTERNATIONAL UNIVERSITY & SEMINARY, CORP

FILED Dec 12, 2014 Secretary of State

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

2155 LAUREL BLOSSOM CIRCLE 5402 NW 27 WAY

OCOEE, FL 34761 C/O DR. SANDRA CODNER

TAMARAC, FL 33309

Current Mailing Address: New Mailing Address:

2155 LAUREL BLOSSOM CIRCLE 6919 W. BROWARD BLVD OCOEE, FL 34761 UPS STORE BOX # 269

PLANTATION, FL 33317

FEI Number: 46-3908313 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:

SIMPSON, CLAUDETTE M CICA-INTERNATIONAL UNIVERSITY AND SEMINARY 2155 LAUREL BLOSSOM CIRCLE 5402 NW 27 WAY

OCOEE, FL 34761 US TAMARAC, FL 33309 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: SHARON BAQUEDO-PHINN 12/12/2014

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: BAQUEDO-PHINN, SHARON J

Address: 107-12 GUY R BREWER BLVD., APT 10C

City-St-Zip: JAMAICA, NY 11433 US

Title: VP

Name: MCDOWELL-GIBSON, HOPE Address: 153-01 JAMAICA AVE City-St-Zip: JAMAICA, NY 11432 US

Title: S

Name: SIMPSON, CLAUDETTE M Address: 2155 LAUREL BLOSSOM CIRCLE

City-St-Zip: OCOEE, FL 34761 US

I hereby 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 all other like empowered.

SIGNATURE: SHARON J. BAQUEDO-PHINN PRES 12/12/2014