

POWER OF ATTORNEY

Please select the type of organization:

- Corporation** **Individual**
- Partnership** **Sole Proprietorship**

Please provide your IRS or Social Security Number:

Date:

Name of your organization (Please include your DBA name, if applicable)
Doing business under the laws of the Commonwealth of Puerto Rico

Registered under the laws of:

(State, Country)

Having a place of business at:

(If you are an individual, please include your residential address.)

Hereby constitutes and appoints NRI, Inc. DBA Néstor Reyes, Inc. through its officers and authorized employees, and other Customs Brokers acting as the grantor's agent as a true and lawful agent and attorney of the grantor named above for and in the name place and stead of said grantor from this date and in all Customs District Ports and in no other name, to make, endorse, sign, declare or swear to any entry withdrawal, declaration, certificate, bill of lading, or other document required by law regulation in connection with the importation, transportation, or exportation of any merchandise shipped or consigned by or to said grantor, to perform any act or condition which may be required by law or regulation in connection with such merchandise, to receive any merchandise deliverable to said grantor.

To make endorsements on bills of lading conferring authority to make entry and collect drawback, and to make, sign, declare, or swear to any statement, supplemental statement, schedule, supplemental schedule, certificate of delivery, certificate of manufacture, certificate of manufacture and delivery, abstract of manufacturing records, declaration of proprietor on drawback entry, declaration of exporter on drawback entry, or any other affidavit or document which may be required by law or regulation for drawback purposes, regardless of whether such bill of lading, sworn statement, schedule, certificate, abstract, declaration, or other affidavit or document is intended for filing in said district or any other customs district.

To sign, seal, and deliver for and as the act of said grantor any bond required by law or regulation in connection with the entry or withdrawal of imported merchandise or merchandise exported with or without benefit of drawback, or in connection with the entry, clearance, lading, unlading or navigation of any vessel or other means of conveyance owned or operated by said grantor, and any and all bonds which may be voluntarily given and accepted under applicable laws and regulations, consignee's and owner's declarations provided for in section 485, Tariff Act of 1930, as amended, or affidavits in connection with the entry of merchandise:

To sign and swear to any document and to perform any act that may be necessary or required by law or regulation in connection with the entering, clearing, lading, unlading, or operation of any vessel or other means of conveyance owned or operated by said grantor;

And generally to transact at the customshouses in said district any and all customs business, including making, signing and filing of Protests under section 514 of the Tariff Act of 1930, in which said grantor is or may be concerned or interested and which may properly be transacted or performed by an agent and attorney, giving to said agent and attorney full power and authority to do anything whatever requisite and necessary to be done in the premises as fully as said grantor could do if present and acting, hereby ratifying and confirming all that the said agent and attorney shall lawfully do by virtue of these presents, the foregoing power of attorney to remain in full for and effect until:

Please add the period of effectiveness of this Power of Attorney

Or notice of revocation in writing is duly given to and received by the District Director of Customs of the district aforesaid. If the donor of this power of attorney is a partnership, and said the power shall in no case have any force or effect after the expiration of 2 years, from the date of its receipt in the office of the district director of customs of the said district.

In Witness Whereof, the said:

Name of your organization (Please include your DBA name, if applicable)

Has caused these presents to be sealed and signed:

Printed Name:

Signature: _____

Capacity:

Corporate Seal (Optional): _____