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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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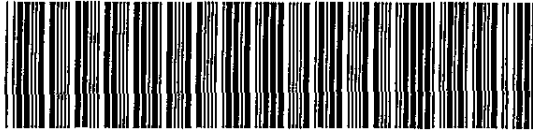
(Business Entity Name)

(Document Number)

Certified Copies 1      Certificates of Status 1

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M. HODGES

05-07-05 PM 0:55

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ASSOCIAÇÃO EVANGÉLICA DE ACAMPAMENTOS - CORPORATION  
(Name of Corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

GLADYS ZIRENA  
\_\_\_\_\_  
(Name of Person)

LATIN AMERICA MISSION  
\_\_\_\_\_  
(Firm/Company)

5465 NW 36TH STREET  
\_\_\_\_\_  
(Address)

MIAMI, FL 33166  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

GLADYS ZIRENA at ( 305 ) 884-8400  
\_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:*

1. ASSOCIAÇÃO EVANGÉLICA DE ACAMPAMENTOS, CORPORATION  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. BRAZIL (State or country under the law of which it is incorporated) 3. N/A (FEI number, if applicable)
4. PERPETUAL (Date of Incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
6. N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. RUA PROF. LÍDIA DE SÁ GUIMARÃES, 180 - QD. 14, LT. 33 - ANÁPOLIS, GO 75075-850 - BRAZIL (Principal office address)
- CAIXA POSTAL 1947 - ANÁPOLIS, GO 75040-970 - BRAZIL (Current mailing address)

8. OPEN BANK ACCOUNT TO RECEIVE AND INVEST FUNDS, AND MAKE PAYMENTS.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: GLADYS ZIRENA

Office Address: 5465 NW 38TH STREET

MIAMI, Florida 33166  
(City) (Zip Code)

05 JUL -6 PM 2:55  
FBI

10. Registered Agent's acceptance:  
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered Agent's signature)

11. Attached is a Certificate of Existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: ESDRAS O. KREBSKY

Address: RUA ONZE, QD. 17 A, LT. B - VILA GÓIS  
ANÁPOLIS, GO 75120-330 - BRAZIL

Vice Chairman: ALAN C. MULLINS

Address: CAIXA POSTAL 1947  
ANÁPOLIS - GO 75040-970 - BRAZIL

Director: N/A

Address: \_\_\_\_\_

Director: N/A

Address: \_\_\_\_\_

**B. OFFICERS**

President: DIRLEI A. BRUDER

Address: RUA PROF. MARIA ALVES CASTILHO, 540 - BAIRRO SANTA MÔNICA  
UBERLÂNDIA, MG 38408-260 - BRAZIL

Vice President: RUY DE FREITAS PAULA

Address: RUA AMÉRICO VESPUCCI, 484 - VILA PRUDENTE  
SÃO PAULO, SP 03135-010 - BRAZIL

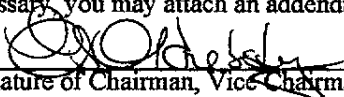
Secretary: ELIZABETH ZUH SILVA

Address: AV. JOÃO DEL PAPA, 138 - AP.14, BL. 25 - JD. PIRATININGA - OSASCO, SP 06236-020 - BRAZIL

Treasurer: ADILSON SCHNEIDER

Address: CAIXA POSTAL 90 - COTIA, SP 06717-970 - BRAZIL

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.


13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. ESDRAS O. KREBSKY, EXECUTIVE DIRECTOR  
(Typed or printed name and capacity of person signing application)

## Comprovante de Inscrição e de Situação Cadastral

Contribuinte,

Confira os dados de Identificação da Pessoa Jurídica e, se houver qualquer divergência, providencie junto à SRF a sua atualização cadastral.

		<b>REPÚBLICA FEDERATIVA DO BRASIL</b>	
		<b>CADASTRO NACIONAL DA PESSOA JURÍDICA</b>	
NÚMERO DE INSCRIÇÃO <b>53.634.366/0001-89</b>	<b>COMPROVANTE DE INSCRIÇÃO E DE SITUAÇÃO CADASTRAL</b>		DATA DE ABERTURA <b>28/06/1984</b>
NOME EMPRESARIAL <b>ASSOCIACAO EVANGELICA DE ACAMPAMENTOS</b>			
TÍTULO DO ESTABELECIMENTO (NOME DE FANTASIA) *****			
CÓDIGO E DESCRIÇÃO DA ATIVIDADE ECONÔMICA PRINCIPAL <b>91.91-0-00 - Atividades de organizações religiosas</b>			
CÓDIGO E DESCRIÇÃO DA NATUREZA JURÍDICA <b>302-6 - ASSOCIACAO</b>			
LOGRADOURO <b>RUA QUATORZE BIS</b>	NÚMERO <b>151</b>	COMPLEMENTO	
CEP <b>13.070-040</b>	BAIRRO/DISTRITO <b>JD CHAPADAO</b>	MUNICÍPIO <b>CAMPINAS</b>	UF <b>SP</b>
SITUAÇÃO CADASTRAL <b>ATIVA</b>		DATA DA SITUAÇÃO CADASTRAL <b>18/12/2004</b>	
SITUAÇÃO ESPECIAL *****		DATA DA SITUAÇÃO ESPECIAL *****	

Aprovado pela Instrução Normativa SRF nº 200, de 13 de setembro de 2002.

Emitido no dia 02/06/2005 às 16:04:36 (data e hora de Brasília).

Voltar



República Federativa do Brasil  
Estado de Goiás

**Ézia Cunha Mullins**

*Tradutora Pública e Intérprete Comercial no idioma Inglês*

MATRICULADA NA JUNTA COMERCIAL DO ESTADO DE GOIÁS SOB Nº 008  
CPF - 763988971-53 / RG - 36713.105-5 / INSS - 113491502-60 / ISS - 51890

Av. Princesa Isabel, nº 955, Apt. 201 - B. Antônio Fernandes - Anápolis, GO 75060-540  
Telefax: 62-315-8256 / Celular: 62-8911-6620 / E-mail - mullins@brturbo.com.br

06/07/05  
Ézia Cunha Mullins  
Tradutora Juramentada  
Mec. 008 - JUCEG  
E. Mullins

Nome do Documento: EVIDENCE OF INSCRIPTION AND OFFICIAL REGISTRY STATUS

Tradução Nº 40

Livro Nº 1

Fls. 77

The undersigned, Ézia Cunha Mullins, sworn public translator of the English/Portuguese languages, does hereby certify that a document written in the Portuguese language and printed off the Brazilian Internal Revenue Service web page was presented to her in order to be translated into English, which she has executed in her official capacity, to wit:

**Evidence of Inscription and Official Registry Status**

Taxpayer,

Please verify the legal entity's identification data and, if there are any discrepancies, take measures to complete the official registry updates at the appropriate Internal Revenue Service office.

*(Imprinted image of the Brazilian Coat of Arms)*

**Federal Republic of Brazil  
National Official Registry of Legal Entity**

Inscription Number - 53.634.366/0001-89

Evidence of Inscription and Official Registry Status

Starting date: 06/28/1984

Name of the corporation: ASSOCIAÇÃO EVANGÉLICA DE ACAMPAMENTOS

Entity's Title: -----

Code and Description of Main Economical Activity: 91.91-0-00 - religious organizational activities

Code and Description of Legal Entity: 302-6 - ASSOCIATION

Address:

(Street) Rua Quatorze Bis (Number) 151 (Zip Code) 13.070-040 (District) Jardim Chapadão (City) Campinas (State) SP

Registry Status: ACTIVE

Date of Last Verification Update: 12/18/2004

Special Situation: -----

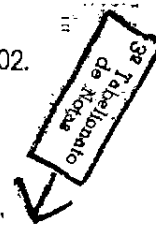
Date of Special Situation: -----

Approved by Normative Decree Number 200 - Internal Revenue Service (Brazil), September 13, 2002.

Issued on 06/02/2005 at 4:04:36 PM (Brasília date and time).

I hereby sign the foregoing as a complete and faithful translation.

*Ézia C. Mullins*  
Ézia Cunha Mullins  
Official Translator N. 008 - JUCEG



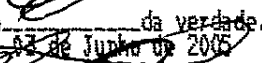
Fee: R\$ 40,00  
Number of pages: 01  
Receipt #: 045  
Date: 06-03-2005



**J. TABELIONATO DE NOTAS DE ANAPOLIS**

Rua 15 de Dezembro, 158, salas 17/20  
Est. de Goiás - Tel. (62) 324-0285

Reconheço, por semelhança, a(s) assinatura(s) retro de:  
0056097-EZIA CUNHA MULLING.....  
por analoga(s) ao(s) exemplar(es)  
constante(s) de nossos arquivos. Dou fe.

Em testemunho  da verdade.  
Anapolis, 03 de Junho de 2005

005-WILLIAN BORGES DE CARVALHO  
ESCREVENTE