

**2006 NOT-FOR-PROFIT CORPORATION  
REINSTATEMENT**

FILED 182

06 APR 11 AM 9:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 05-06



DOCUMENT # N03000009041  
1. Entity Name #  
APOSENTO CRISTIANO PARA LAS NACIONES INC.



Principal Place of Business  
10407 N. NEBRASKA AVE  
TAMPA, FL 33612

Mailing Address  
10432 LIGHTER BRIDGE DRIVE  
TAMPA, FL 33626

2. Principal Place of Business  
3702 W. Kennedy Blvd

3. Mailing Address  
P.O BOX 706

Suite, Apt. #, etc.

City & State  
Tampa, Florida

City & State  
Odessa, FL

Zip  
33609

Country  
Hillsborough

Zip  
33556

Country  
Hillsborough

04062006 REIN-NP CR2E099 (11/05)

4. FEI Number  
65-1207140

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MEDINA, EDDIE J  
10432 LIGHTER BRIDGE DR  
TAMPA, FL 33626

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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.

SIGNATURE Eddie Medina DATE 4-6-06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$122.50**

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
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05/05/06--01030--006 \*\*122.50

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eddie Medina Date 4/6/06 Daytime Phone # 813-870-1440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

292

April 6, 2006

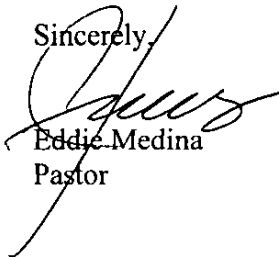
Florida Department of State  
Division of Corporations

Dear Sirs:

Our church never received the renewal notice in 2004, which is why the corporation was administratively dissolved.

Please accept our payment for the years 2004 and 2005 to reinstate the same. We apologize for the inconvenience and pray you to accept our request.

Sincerely,



Eddie Medina  
Pastor