

PLEASE READ ALL INSTRUCTIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


09 NOV -6 AM 11:36

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11/06/09--01043--012 **122.50

300162034393
10/22/09--01033--009 **8.75

KS

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N05000010467

1. Corporation Name
Rescue Operation Ministry, inc.

REINSTATEMENT 08-09
CR2E081 (12/08)

2. Principal Office Address - No P.O. Box # <u>12728 Longcrest Drive</u>		3. Mailing Office Address <u>12728 Longcrest Drive</u>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <u>Riverview, FL</u>		City & State <u>Riverview, FL</u>	
Zip <u>33579</u>	Country <u>USA</u>	Zip <u>33579</u>	Country <u>USA</u>

4. Date Incorporated or Qualified To Do Business in Florida 10-10-2005

5. FEI Number 27-0132811

Applied For	<input type="checkbox"/>
Not Applicable	<input checked="" type="checkbox"/>

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Lauren Elizabeth Burgos

Street Address (P.O. Box Number is Not Acceptable)
12728 Longcrest Drive

Suite, Apt. #, Etc.

City Riverview State FL Zip Code 33579

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent Lauren Burgos Date 10-19-2009

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Sergio Wilson Q. Ponce	9611 West Park Village Dr.	Carrollwood, FL 33626
V	Estevao Q. Ponce	9611 West Park Village Dr.	Carrollwood, FL 33626
D	Lauren Burgos	12728 Longcrest Drive	Riverview, FL 33579
C	Mark L. Zimmer	9384 Water Course Way	Boynton Beach, FL 33437

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Lauren Burgos Lauren Burgos Date 10-19-2009 Daytime Phone # 813-382-1074

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR