

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 MAR 30 AM 5:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N25242

1. Corporation Name

HERMANDAD DEL SEÑOR DE LOS MILAGROS DEL SUR DE LA FLORIDA

Principal Place of Business

SAN ISIDRO CATHOLIC CHURCH
2310 M. LUTHER KING BLVD.
POMPANO BEACH, FL 33069

Mailing Address

P.O. Box 934772
MARGATE, FL 33093

REINSTATEMENT 94-98

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

3/31/98

5. FEI Number

65-0065208

Applied For

Not Applicable

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

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

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	PEDRO A. VILLANUEVA	2842 NW 95th AVENUE	CORAL SPRINGS, FL 33065, D
S	JOSE A. ROJAS	4872 NW 95th AVENUE	SUNRISE, FL 33351, D
T	MARCIAL WONG	15748 WOODGATE COURT	SUNRISE, FL 33326, D
Co-T	JOSE M. CHAVEZ	550 E. CONFERENCE DR	BOCA RATON, FL 33486, D
			200002477152--7 -04/02/98--01079--015 ****490.00 ****490.00

8. Name and Address of Current Registered Agent

WILSON ALVARADO
6576 NW 2ND STREET
MARGATE, FL 33063

9. Name and Address of New Registered Agent

Name PEDRO A. VILLANUEVA
Street Address (P.O. Box Number is Not Acceptable) 2842 NW 95th AVENUE
Suite, Apt. #, Etc.
City CORAL SPRINGS State FL Zip Code 33065

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Pedro Villanueva
REGISTERED AGENT MUST SIGN

Date

2/20/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes No

(See other side for information on intangible tax.)

12. 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 under section 119.07(3)(i), 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:

Pedro Villanueva
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/20/98

(954) 344-1124
Daytime Phone #
(651) 755-0511

CR2E040 (1/98)