

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000002819

FILED
Nov 25, 2009
Secretary of State

Entity Name: MINISTERIO CAMINO DE VIDA, INC.

Current Principal Place of Business:

2095 SW 1 ST
MIAMI, FL 33125

New Principal Place of Business:

801 NW 37 AVE
#219
MIAMI, FL 33125

Current Mailing Address:

2095 SW 1 ST
MIAMI, FL 33125

New Mailing Address:

801 NW 37 AVE
#219
MIAMI, FL 33125

FEI Number: 65-0715359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BARAHONA, NOE
2095 1 ST
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

BARAHONA, NOE
330 SW 81 AVE
MIAMI, FL 33144 US

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.

SIGNATURE: NOE BARAHONA

11/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARAHONA, NOE PASTOR
Address: 2095 SW 1 ST
City-St-Zip: MIAMI, FL 33125

Title: V () Delete
Name: BARAHONA, ESTHER L
Address: 2095 SW 1 ST
City-St-Zip: MIAMI, FL 33125

Title: T (X) Delete
Name: BANEGA, GERMAN A
Address: 260 NW 21 AVE
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARAHONA, NOE PASTOR
Address: 330 SW 81 AVE
City-St-Zip: MIAMI, FL 33144

Title: VPGM (X) Change () Addition
Name: BARAHONA, ESTHER L
Address: 330 SW 81 AVE
City-St-Zip: MIAMI, FL 33144

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NOE BARAHONA

P

11/25/2009

Electronic Signature of Signing Officer or Director

Date