

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

15 MAY 29 AM 8:57

DOCUMENT # 7L8085.

1. Corporation Name

Iglesia Bautista Emanuel  
(Dios esta con nosotros)

2. Principal Office Address - No P.O. Box #

1310 Red Fox Run

Suite, Apt. #, etc.

City & State

Deltona, FL

Zip

32725

Country

Volusia

3. Mailing Office Address

1310 Red Fox Run

Suite, Apt. #, etc.

City & State

Deltona, FL

Zip

32725

Country

Volusia

STATE OF FLORIDA  
HAWKES, FLORIDA

100273394061  
05/27/15--01026--018 \*\*481.25

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida

4-21-1983

5. FEI Number

59-2287665

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Vilma L. Rivera

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

916 Florida Ave.

Suite, Apt. #, Etc.

City

Orange City

State

FL

Zip Code

32763

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

Vilma L. Rivera

Date 5-19-2015

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
Secretary	Vilma L. Rivera	916 Florida Ave.	Orange City, FL 32763
Diac.	Hilda G. Nieves	788 Trumbull St.	Deltona, FL 32725
Dir. Evangel.	Julietta Baltazar	1500 Randolph St.	Deltona, FL 32725
REINSTATEMENT			S. HAWKES
2011-2015			MAY 28 A.M.
			EXAMINER

10. E-mail Address: Vilma L. 525@a-yahoo.com

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: Vilma L. Rivera - VILMA L. RIVERA

5-19-2015

(386)  
216-7448