## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N0000000946

Nov 20, 2007 Secretary of State

FILED

Entity Name: IGLESIA DE JESUCRISTO-PUERTA DEL CIELO, INC.

US

**Current Principal Place of Business: New Principal Place of Business:** 

12275 NW 97 COURT

HIALEAH GARDENS, FL 33018

**Current Mailing Address: New Mailing Address:** 

12275 NW 97 COURT HIALEAH GARDENS, FL 33018

FEI Number: 65-0990454 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMIREZ, ELIEZER PASTOR 12275 NW 97 COURT HIALEAH GARDENS, FL 33018

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: ELIEXER RAMIREZ

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete RAMIREZ, ELIEZER PASTOR RAMIREZ, ELIEXER PASTOR Name: Name: 12275 NW 97TH CT Address: 12275 NW 97TH CT Address:

City-St-Zip: HIALEAH GARDENS, FL 33018 City-St-Zip: HIALEAH GARDENS, FL 33018

Title: SD Title: (X) Change ( ) Addition ( ) Delete RICO, SOLANGEL Name: FAURE, GRETISZ Name:

Address: 12275 NW 97 CT Address: 9811 W OKEECHOBEE RD #108

City-St-Zip: HIALEAH GARDENS, FL 33018 City-St-Zip: HIALEAH GARDENS, FL 33016

Title: VD () Delete Title: VD. (X) Change ( ) Addition BUITE, NICOLAS RICO, SOLANGEL Name: Name: 510 E 59TH STREET Address: 12275 NW 97 CT

Address: City-St-Zip: HIALEAH, FL 33013 City-St-Zip: HIALEAH GARDENS, FL 33018

Title: () Delete Title: (X) Change ( ) Addition

Name: MEDINA, ADELA Name: GIL, HIGINIO 850 BURLINETON ST Address: Address: 18145 NW 84 AVE City-St-Zip: OPA LOCKA, FL 33054 City-St-Zip: MIAMI FL, FL 33015

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: ELIEXER RAMIREZ PD 11/20/2007