

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **N01000001599**

1. Corporation Name

**GENTE JOVEN MINISTRIES, INC.**

Principal Place of Business

8541 S.W. 27TH LANE  
MIAMI FL 33155-2340

Mailing Address

8541 S.W. 27TH LANE  
MIAMI FL 33155-2340

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

03/05/2001

5. FEI Number

65-1098520

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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	TORRES, CHARY	8541 S.W. 27TH LANE	MIAMI FL 33155
VD	TORRES, SERGIO	8541 S.W. 27TH LANE	MIAMI FL 33155
SD	TORRES, ALEJANDRA	8541 S.W. 27TH LANE	MIAMI FL 33155
TD	LOPEZ, DAVID	238 EAST 11 ST.	HIALEAH FL 33010

300024333473  
10/31/03 01056 001 \*\*175.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

TORRES, SERGIO  
8541 S.W. 27TH LANE  
MIAMI FL 33155-2340

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

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. or 617.0505, F.S.

Signature of  
Registered Agent

*SIC Chary Torres*

REGISTERED AGENT MUST SIGN

Date

10/29/03

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., 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:

*SIC Chary Torres*

CHARY TORRES

10/29/03

305-527-9337

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

# gentejoven

Equipping Leaders in Youth Ministry    Capacitando a Líderes en el Ministerio Juvenil

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TO WHOM IT MAY CONCERN,

I really don't know why you send me a Certificate of Administrative Dissolution or Revocation of GENTEJOVEN MINISTRIES, INC. We sent the check with \$65.00 like each year before September of 2003.

I also send an e-mail to [www.sunbiz.org](http://www.sunbiz.org) concerned about this and they said that may be the check was lost because never was posted.

I appreciate your help in this matter.

*Chary Torres*

Chary Torres, President  
gentejoven ministries, inc.

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