

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAR 25 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000002173

1. Corporation Name

International Biblical Seminary The Flame of the Spirit, Inc.

3102 N.W. 31 st. Street

2. Principal Office Address

3102 N.W. 31 st. Street

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Zip

33142

Country

USA

Zip

Country

REINSTATEMENT 03-05

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number
71-0888636

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

Jorge Figueroa

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

3102 N.W. 31st Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33142

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 617.0503, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date *Dec 03, 2004*

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
D	Pedro Segundo Quezada ALMONACID	RUA SARGONIA MONATO VIEIRA NO. 899, CASA NO 97	Pacheco, CUA GENTALO Rio De Janeiro 22473050
D	Jorge Figueroa	3102 N.W. 31st Street	Miami, Florida 33142
S	Joselina LEREDORS FIGUEROA	9760 S.W. 164 St.	Miami, Florida 33157
/			300049885613 04/03/05--0100A 2003 **458.15

10. 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 807.0401 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dec 03, 2004

Date

Daytime Phone #

CR25001 (01/04)