

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 OCT 24 PM 4:34

DOCUMENT # 1102000008030

1. Corporation Name

Eglesia Pentecostal Restauración y Vida Inc.

2. Principal Office Address

2005 W. BALL ST

Suite, Apt. #, etc.

3. Mailing Office Address

2005 W. BALL ST

Suite, Apt. #, etc.

City & State

PLANT CITY FL

Zip

33563

Country

City & State

PLANT CITY FL

Zip

33563

Country

REINSTATEMENT 05

CR2E081 (8/05)

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

01-0569669

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

Jose F Maldonado

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

2005 W BALL ST

Suite, Apt. #, Etc.

City

Plant City

600060214596

10/04/05--01053--009 ** 1.25

600060214596

10/27/05--01044--001 ** 83.75

State

FL

Zip Code

33563

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

Jose F Maldonado

REGISTERED AGENT MUST SIGN

Date 10/1/05

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
P/D	Maldonado José F	2005 W BALL ST	Plant city FL 33563
V/D	Santiago Felisa	2903 S Forbes Rd	Plant city FL 33563
S/D	Carasquillo Nydia L.	2805 S Iena Ave.	Seffner, FL 33566
T/D	Maldonado Aida	2005 W BALL ST	Plant city FL 33563
D	Santiago Jose	2001 W BALL ST	Plant city FL 33563

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 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)(l), 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:

Jose F Maldonado

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/1/05

Date

813-764-9219

Daytime Phone #