

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000003749

**FILED**  
**Oct 09, 2007**  
**Secretary of State**

**Entity Name:** MINISTERIO EVANGELICO JESUCRISTO REFUGIO ETERNO, INC.

**Current Principal Place of Business:**

869 W. 19 ST.  
HIALEAH, FL 33010

**New Principal Place of Business:**

**Current Mailing Address:**

550 SW 115 AVENUE  
UNIT A-7  
MIAMI, FL 33174

**New Mailing Address:**

**FEI Number:** 33-1055995      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

SEGOVIA, VICTOR H  
550 SW 115 AVENUE  
UNIT A-7  
MIAMI, FL 33174 US

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: VICTOR H. SEGOVIA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SEGOVIA, VICTOR H REV.  
Address: 550 SW 115 AVE A7  
City-St-Zip: MIAMI, FL 33174

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V ( ) Delete  
Name: SEGOVIA, MARIA C  
Address: 550 SW 115 AVE A7  
City-St-Zip: MIAMI, FL 33174

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Delete  
Name: RUIZ, ZULMA T  
Address: 8430 N.W 32 AVE  
City-St-Zip: MIAMI, FL 33147

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Delete  
Name: SEGOVIA, DANIELA  
Address: 550 SW 115 AVE A7  
City-St-Zip: MIAMI, FL 33174

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: CARNICERO, ISABEL  
Address: 10101 W OKEECHOBEE #8202  
City-St-Zip: HIALEAH, FL 33016

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: ALMENDAREZ, LORNA N  
Address: 3430 E 4 AVE  
City-St-Zip: HIALEAH, FL 33013

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LORNA ALMENDAREZ

D

10/09/2007

Electronic Signature of Signing Officer or Director

Date