

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000005605

FILED
Oct 04, 2004
Secretary of State**Entity Name:** ASSEMBLY OF GOD NEW LIFE IN HOLLYWOOD, INC.**Current Principal Place of Business:**517 S 21 AVE
HOLLYWOOD, FL 33020**New Principal Place of Business:****Current Mailing Address:**517 S 21 AVE
HOLLYWOOD, FL 33020**New Mailing Address:**9551 WELM LANE
MIRAMAR, FL 33025**FEI Number:** 20-0065621 **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:**TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: ROSA, NOE FULGENCIO
Address: 517 S 21 AVE
City-St-Zip: HOLLYWOOD, FL 33020**Title:** PD () Delete
Name: DUTRA, EDILSON
Address: 517 S 21 AVE
City-St-Zip: HOLLYWOOD, FL 33020**Title:** T () Delete
Name: AKIRA YAMASAKI, SILVANO
Address: 517 S 21 AVE
City-St-Zip: HOLLYWOOD, FL 33020**Title:** S () Delete
Name: SOUZA, MARTA DE
Address: 517 S 21 AVE
City-St-Zip: HOLLYWOOD, FL 33020**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** T () Change (X) Addition
Name: CORREA, MARIA B
Address: 517 S 21 AVE
City-St-Zip: HOLLYWOOD, FL 33020**Title:** S () Change (X) Addition
Name: CATHARINO, LILIAN
Address: 517 S 21 AVE
City-St-Zip: HOLLYWOOD, FL 33020

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NOE FULGENCIO ROSA

P

10/04/2004

Electronic Signature of Signing Officer or Director

Date