

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2007 JUL 31 AM 2:34


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

05-07

CR2E081 (1/07)

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N04000003671

1. Corporation Name
Iglesia Cristiana Discipulos de Cristo de Miami, Inc.

2. Principal Office Address - No P.O. Box #
15380 S.W. 151st Terrace

3. Mailing Office Address
15380 S.W. 151st Terrace

Suite, Apt. #, etc.

City & State
Miami, Florida

City & State
Miami, FL 33196

Zip
33196

Country

Zip
33196

Country

4. Date Incorporated or Qualified To Do Business in Florida
04/05/2004

5. FEI Number
 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
Julio Castro

Street Address (P.O. Box Number is Not Acceptable)
15380 S.W. 151st Terrace

Suite, Apt. #, Etc.

City
Miami

State
FL

Zip Code
33196

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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 _____ Date 07/20/07

REGISTERED AGENT MUST SIGN

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	Aurea San Miguel	15380 S.W. 151 st Terrace Miami, FL 33196	Miami, FL 33196
VP	Esther Vales	15380 S.W. 151 st Terrace	Miami, FL 33196
S	Liza Miranda	15380 S.W. 151 st Terrace	Miami, FL 33196
T	Julio Castro	15380 S.W. 151 st Terrace	Miami, FL 33196
D	Vilson Hurtado	15380 S.W. 151 st Terrace	Miami, FL 33196

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 contained in Chapter 119, 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: Vilson Hurtado Vilson Hurtado - Director 07/20/07 305-975-9016

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #