

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 JAN 29 AM 11:11

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04000005029

1. Corporation Name

Primerà Iglesia Pentecostal De Debarry, Inc

200116316882
01/29/08--01005--020 **236.25

REINSTATEMENT 06-08

2. Principal Office Address - No P.O. Box #

961 Diplomat Drive

Suite, Apt. #, etc.

101 and 102G

City & State

Debarry, FL

Zip

32713

Country

US

3. Mailing Office Address

364 Sable Springs Court

Suite, Apt. #, etc.

City & State

Debarry, FL

Zip

32713

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

5/18/2004

5. FEI Number

510511377

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

Aquino Jose

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

364 Sabal Springs Court

Suite, Apt. #, Etc.

City

Debarry

State

FL

Zip Code

32713

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

Jose Aquino
REGISTERED AGENT MUST SIGN

Date 1/16/2008

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	Jose Aquino	364 Sabal Springs Court	Debarry FL 32713
VP	Hilda N Aquino	364 Sabal Springs Court	Debarry FL 32713
Treas	Brunilda Pabon	2841 W Covington Drive	Deltona FL 32738
Sec	Hilda N Aquino	364 Sabal Springs Court	Debarry FL 32713
Dir	Juan Vargas	360 Metford Ave	Deltona FL 32738
Dir	Annie Brene	150 Acorn Lake Road	Austin FL 32764

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:

Jose Aquino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/2008

Date

386-801-3014

Daytime Phone #