

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000009379

FILED
Nov 09, 2005
Secretary of State

Entity Name: MANOS MINISTRIES NON-PROFIT, INC,

Current Principal Place of Business:

1424 FAIRWAY CIRCLE
WEST PALM BEACH, FL 33413 US

New Principal Place of Business:

14411 COMMERCE WAY
SUITE 420
MIAMI LAKES, FL 33016 US

Current Mailing Address:

1424 FAIRWAY CIRCLE
WEST PALM BEACH, FL 33413 US

New Mailing Address:

14411 COMMERCE WAY
SUITE 420
MIAMI LAKES, FL 33016 US

FEI Number: 34-2026501 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

HERNANDEZ, PEDRO
8281 N.W. 165TH TERRACE
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

HERNANDEZ, PEDRO
14411 COMMERCE WAY
SUITE 420
MIAMI LAKES, FL 33016 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: PEDRO HERNANDEZ

11/09/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HERNANDEZ, PEDRO
Address: 8281 NW 165TH TER
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: SD () Delete
Name: LABRADOR, JUAN
Address: 1424 FAIRWAY CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33413 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HERNANDEZ, PEDRO
Address: 14411 COMMERCE WAY, SUITE 420
City-St-Zip: MIAMI LAKES, FL 33016 US

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

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: PEDRO HERNANDEZ

PD

11/09/2005

Electronic Signature of Signing Officer or Director

Date