

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000010319

FILED
Sep 28, 2005
Secretary of State

Entity Name: COMUNIDADE EVANGELICA RESGATE INC.

Current Principal Place of Business:

242 NW 161TH ST
MIAMI, FL 33169 US

New Principal Place of Business:

16090 NW 2ND AVE
MIAMI, FL 33169 US

Current Mailing Address:

242 NW 161TH ST
MIAMI, FL 33169 US

New Mailing Address:

16090 NW 2ND AVE
MIAMI, FL 33169 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

SILVA, JOSE C
3619 NE 207TH ST
APT. 2109
AVENTURA, FL 33180 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: JOSE C SILVA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SILVA, JOSE C
Address: 3619 NE 207TH ST, APT. 2109
City-St-Zip: AVENTURA, FL 33180

Title: VP/D () Delete
Name: SILVA, APARECIDA
Address: 3619 NE 207TH ST, APT. 2109
City-St-Zip: AVENTURA, FL 33180

Title: TSD () Delete
Name: SILVA, LEANDRO
Address: 3619 NE 207TH ST, APT. 2109
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: SILVA, JOSE C
Address: 3619 NE 207TH ST, APT. 2109
City-St-Zip: AVENTURA, FL 33180 US

Title: VP/D (X) Change () Addition
Name: SILVA, APARECIDA
Address: 3619 NE 207TH ST, APT. 2109
City-St-Zip: AVENTURA, FL 33180 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: JOSE C SILVA

Electronic Signature of Signing Officer or Director

PD

09/28/2005

Date