

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000313

FILED
Sep 21, 2007
Secretary of State

Entity Name: CENTRO CRISTIANO EL CAMINO INC

Current Principal Place of Business:

12013 HAMPSHIRE HILL CT
RIVERVIEW, FL 33569 US

New Principal Place of Business:

Current Mailing Address:

12013 HAMPSHIRE HILL CT
RIVERVIEW, FL 33569 US

New Mailing Address:

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:

Name and Address of New Registered Agent:

SOLANO, GIOVANNI P
12013 HAMPSHIRE HILL CT
RIVERVIEW, FL 33569 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: GIOVANNI SOLANO

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SOLANO, GIOVANNI P
Address: 12013 HAMPSHIRE HILL CT
City-St-Zip: RIVERVIEW, FL 33569 US

Title: VP () Delete
Name: DICKSON, ROSA E
Address: 15184 SW 110 ST
City-St-Zip: MIAMI, FL 33196 US

Title: S () Delete
Name: SALCEDO, GLORIA
Address: 16283 NW 17 CT
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: T () Delete
Name: PARRA, ELENA J
Address: 12013 HAMPSHIRE HILL CT
City-St-Zip: RIVERVIEW, FL 33569 US

Title: S () Delete
Name: PARRA, ANDRES
Address: 12310 HEALEY SUMMIT LN
City-St-Zip: RIVERVIEW, FL 33569

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
Name:
Address:
City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GIOVANNI SOLANO

P

09/21/2007

Electronic Signature of Signing Officer or Director

Date