PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORAT REINSTATEM	(balleria Little)	S	DEPART Secretary	of St		1	FILED 10 FEB -5 AM II: 37	
DOCUMENT # N0500000870 1. Corporation Name						S. TA	edretary of State Leahassee. Florida	
Ministerio Al Rescate Y Restauracion De Vidas Inc.						l		
Principal Office Address - No P.O. Box # 3. Mailing Office Address 1616 Lisenby Ave. 1420 Balboa Ave.						900168088359 02/05/1001024016 **131.25 cr2E081 (11/09)		
Suite, Apt. #, etc.	Suite, Apt. #, etc.				CRZEOST (TIIOS)			
· · ·	Apt. I-65				Date Incorporated or Qualified To Do Business in Florida 02/27/2005			
City & State Panama Cit	City & State Panama City,				5. FEI Number Applied For 36-4567683 Not Applied by Not Applied Applied For Not Applied By Not Applied For Not			
^{Zip} 32401	Country U.S.A	32401		Count U.S.,		6. CERTIFICATE	S8.75 Additional Fee required to a Certificate of Status	
7. Name and Address of Current Registered Agent						☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you		
Name Rev. Candido Guadalupe Street Address (P.O. Box Number is Not Acceptable) 1420 Balboa Ave.								
Suite, Apt. #, Etc. Apt. I-65						are certifying the prior notices were not received and requesting the reinstatement fee be waived.		
Panama City					Zip Code 32401			
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 REGISTERED AGENT MUST SIGN						Date 02/ \$ 72010		
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	
President Rev.	Rev. Candido Guadalupe 1420 Balboa				boa Ave. /	Apt. I-65	Panama City, Florida 42401	
Secretary Norm	Norma I. Ramos			1420 Balboa Ave. Apt. J-74			Panama City, Florida 32401	
Treasure Yaha	Yahaira Rivera			410 Maple Ave.			Panama City, Florida 32401	
Deacon Jose	∞n Jose Valdiviezo			1616 Lisenby Ave.			Panama City, Florida 32401	
	<u></u>							
10. E-mail Address: CGuadalupe8898@yahoo.com								
(To be used for future annual report notification) 11. 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 filling 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. I further certify, 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: Rev. Candido Guadalupe 02/\$72010 850-691-9624								

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date