## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N05000001171

FILED Dec 08, 2006 Secretary of State

Entity Name: MINISTERIO MIENTRAS HAY VIDA HAY ESPERANZA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

701 PROVIDENCE TRACE CIRCLE, STE. 301 10420 RIVER BREAM DRIVE

BRANDON, FL 335117044 RIVERVIEW, FL 33569

**Current Mailing Address: New Mailing Address:** 

701 PROVIDENCE TRACE CIRCLE, STE. 301 P. O. BOX 6234

BRANDON, FL 335117044 BRANDON, FL 335086004 US

FFI 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:

MUNOZ-SOTO, CARLOS I. MUNOZ-SOTO, CARLOS I 701 PROVIDENCE TRACE CIRCLE, STE. 301 10420 RIVER BREAM DRIVE

BRANDON, FL 335117044 US RIVERVIEW, FL 33569

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: CARLOS MUNOZ

12/08/2006 Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete MUNOZ-SOTO, CARLOS I. MUNOZ-SOTO, CARLOS I Name: Name:

701 PROVIDENCE TRACE CIRCLE, STE. 301 Address: 10420 RIVER BREAM DRIVE Address: City-St-Zip: BRANDON, FL 335117044 City-St-Zip: RIVERVIEW, FL 33569

(X) Change ( ) Addition Title: () Delete Title:

Name: PEREZ, MARISOL Name: PEREZ, MARISOL

Address: 701 PROVIDENCE TRACE CIRCLE, STE. 301 Address: 10420 RIVER BREAM DRIVE City-St-Zip: BRANDON, FL 335117044 City-St-Zip: RIVERVIEW, FL 33569

Title: DS (X) Delete Title: () Change () Addition

TOSADO, ADA L. Name: Name: 1901 TUPELO LANE Address: Address: City-St-Zip: WESLEY CHAPEL, FL 33543 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CARLOS MUNOZ DP 12/08/2006