

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N05000003300

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Entity Name:** IGLESIA CRISTIANA RENACER INC.

**Current Principal Place of Business:**

3045 MALLORD DRIVE  
DELTONA, FL 32738

**New Principal Place of Business:**

**Current Mailing Address:**

3045 MALLORD DRIVE  
DELTONA, FL 32738

**New Mailing Address:**

P.O. BOX 5687  
DELTONA, FL 32728

**FEI Number:** 06-4626241

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

OSORIO, RAFAEL  
590 GERALDINE DRIVE  
DELTONA, FL 32725 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:** RAFAEL OSORIO

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** OSORIO, RAFAEL  
**Address:** 590 GERALDINE DR  
**City-St-Zip:** DELTONA, FL 32725

**Title:** DV  
**Name:** GONZALEZ-JUAREZ, AMELDI  
**Address:** 650 WING TERT.  
**City-St-Zip:** DELTONA, FL 32725

**Title:** DS  
**Name:** ROMAN, OCTAVIO  
**Address:** 1592 FT. SMITH  
**City-St-Zip:** DELTONA, FL 32725

**Title:** MRS.  
**Name:** ROQUE, HAYDEE  
**Address:** 590 GERALDINE DR.  
**City-St-Zip:** DELTONA, FL 32725

I hereby 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 all other like empowered.

**SIGNATURE:** AMELDI GONZALEZ-JUAREZ

DV

01/14/2011

Electronic Signature of Signing Officer or Director

Date