

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000006073

FILED
Nov 02, 2006
Secretary of State

Entity Name: RESCUE AN INNOCENT LIFE, INC.

Current Principal Place of Business:

4862 CASON COVE DR - APT. 203
ORLANDO, FL 32811

New Principal Place of Business:

12921 FAIR MEADOWS CT.
ORLANDO, FL 32837 US

Current Mailing Address:

4862 CASON COVE DR - APT. 203
ORLANDO, FL 32811

New Mailing Address:

12921 FAIR MEADOWS CT.
ORLANDO, FL 32837 US

FEI Number: 20-2837620 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

SANTIAGO, CARMEN
4862 CASON COVE DR - APT. 203
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

SANTIAGO, CARMEN
5888 TRADEWINDS LANE
ORLANDO, FL 32819 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: CARMEN SANTIAGO

11/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SANTIAGO, CARMEN
Address: 4862 CASON COVE DR - APT. 203
City-St-Zip: ORLANDO, FL 32811

Title: V () Delete
Name: FIGUEROA, LEONARDO
Address: 4862 CASON COVE DR - APT. 203
City-St-Zip: ORLANDO, FL 32811

Title: ST () Delete
Name: RAMIREZ, MONSERRATE
Address: 4862 CASON COVE DR - APT. 203
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANTIAGO, WANDA
Address: P.O. BOX 5172
City-St-Zip: WINTER PARK, FL 32793 US

Title: V (X) Change () Addition
Name: FIGUEROA, LEONARDO
Address: 4862 CASON COVE DR - APT. 203
City-St-Zip: ORLANDO, FL 32811 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 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: WANDA SANTIAGO

P

11/02/2006

Electronic Signature of Signing Officer or Director

Date