2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000006073

Entity Name: RESCUE AN INNOCENT LIFE, INC.

FILED Jan 16, 2009 Secretary of State

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

12921 FAIR MEADOWS CT. 12910 FAIR MEADOWS CT. ORLANDO, FL 32837 US ORLANDO, FL 32837 US

Current Mailing Address: New Mailing Address:

12921 FAIR MEADOWS CT. 12910 FAIR MEADOWS CT. ORLANDO, FL 32837 US 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: Name and Address of New Registered Agent:

SANTIAGO, CARMEN
12921 FAIR MEADOWS CT.
ORLANDO, FL 32837 US
SANTIAGO, CARMEN
12910 FAIR MEADOWS CT.
ORLANDO, FL 32837 US
ORLANDO, FL 32837 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 01/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: SANTIAGO, WANDA Name: SANTIAGO, CARMEN

Address: P.O. BOX 5172 Address: 12910 FAIR MEADOWS CT
City-St-Zip: WINTER PARK, FL 32793 US City-St-Zip: ORLANDO, FL 32837 US

Title: V () Delete Title: V (X) Change () Addition Name: FIGUEROA, LEONARDO Name: FIGUEROA, LEONARDO

 Address:
 4862 CASON COVE DR - APT. 203
 Address:
 12910 FAIR MEADOWS CT

 City-St-Zip:
 ORLANDO, FL 32811 US
 City-St-Zip:
 ORLANDO, FL 32837 US

Title: ST () Delete Title: () Change () Addition

 Name:
 RAMIREZ, MONSERRATE
 Name:

 Address:
 4862 CASON COVE DR - APT. 203
 Address:

 City-St-Zip:
 ORLANDO, FL 32811
 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: CARMEN SANTIAGO PRES 01/16/2009