

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000011912

FILED  
Feb 25, 2008  
Secretary of State

**Entity Name:** TEMPLO APOSENTO ALTO INC.

**Current Principal Place of Business:**

15034 HILL RD  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

15034 HILL RD  
DADE CITY, FL 33525

**New Mailing Address:**

**FEI Number:** 20-3863595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASAREZ, EZEQUIEL  
8115 23RD ST  
ZEPHYRHILLS, FL 33540 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:** EZEQUIEL CASAREZ

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: ROSALES, FRANCISCO  
Address: 14603 19TH ST  
City-St-Zip: DADE CITY, FL 33523

Title: VT ( ) Delete  
Name: ROSALES, MARIA  
Address: 14603 19TH ST  
City-St-Zip: DADE CITY, FL 33523

Title: S ( ) Delete  
Name: CASAREZ, EZEQUIEL R  
Address: 8115 23RD ST  
City-St-Zip: ZEPHYRHILLS, FL 33540

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: T (X) Change ( ) Addition  
Name: SANCHEZ, DIANA  
Address: 37837 HART CIRCLE  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S (X) Change ( ) Addition  
Name: CASAREZ, MARIA  
Address: 8115 23 ST  
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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:** EZEQUIEL CASAREZ

D

02/25/2008

Electronic Signature of Signing Officer or Director

Date