2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000001705

FILED Apr 10, 2008 Secretary of State

Entity Name: ROCKING THE NATIONS INTERNATIONAL MINISTRIES INC.

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

5809 NORTH THATCHER AVE 702 W COLUMBUS DRIVE

TAMPA, FL 33614 TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

5809 NORTH THATCHER AVE 6384 BILTMORE AVE TAMPA, FL 33614 WEBSTER, FL 33597

FEI 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:

ALVAREZ, MANUEL A
5809 NORTH THATCHER AVE
TAMPA, FL 33614 US
PUENTES, NICOLE M
6384 BILTMORE AVE
WEBSTER, FL 33597 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: NICOLE PUENTES 04/10/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D () Delete Title: P, D (X) Change () Addition Name: ALVAREZ, MANUEL Name: ALVAREZ, MANUEL

Address: 5809 NORTH THATCHER AVE
City-St-Zip: TAMPA, FL 33614

Address: Address: 8153 HARDSTONE DRIVE
City-St-Zip: WEBSTER, FL 33597

Title: VP,D () Delete Title: VP,D (X) Change () Addition

 Name:
 PUENTES, PATRICK
 Name:
 PUENTES, PATRICK

 Address:
 34100 CORNERSTONE DRIVE
 Address:
 6384 BILTMORE AVE

 City-St-Zip:
 WEBSTER, FL 33597
 City-St-Zip:
 WEBSTER, FL 33597

 $\label{eq:Title:Title:T,D} \textit{Title:} \qquad \textit{T,D} \qquad \textit{()} \; \textit{()} \; \textit{(A)} \; \textit{Change} \; \textit{()} \; \textit{Addition}$

 Name:
 ALVAREZ, DONNA
 Name:
 ALVAREZ, DONNA

 Address:
 5809 NORTH THATCHER AVE
 Address:
 8153 HARDSTONE DRIVE

 City-St-Zip:
 TAMPA, FL 33614
 City-St-Zip:
 WEBSTER, FL 33597

 $\label{eq:title: S,D} \mbox{Title: S,D} \mbox{ () Delete} \mbox{ Title: S,D} \mbox{ (X) Change () Addition}$

 Name:
 PUENTES, NICOLE
 Name:
 PUENTES, NICOLE

 Address:
 34100 CORNERSTONE DRIVE
 Address:
 6384 BILTMORE AVE

 City-St-Zip:
 WEBSTER, FL 33597
 City-St-Zip:
 WEBSTER, FL 33597

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: NICOLE PUENTES S,D 04/10/2008