

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUN 13 PM 3:35

DOCUMENT # NO6000011197

1. Corporation Name

VISION FOR THE NATIONS, INC

2. Principal Office Address - No P.O. Box #

10817 DIXON DRIVE

Suite, Apt. #, etc.

City & State

RIVERVIEW FL

Zip

33569

Country

USA

3. Mailing Office Address

10817 DIXON DRIVE

Suite, Apt. #, etc.

City & State

RIVERVIEW FL

Zip

33569

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

10/26/06

5. FEI Number

20-5791369

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

KEN ARENA EA

Street Address (P.O. Box Number is Not Acceptable)

KEN ARENA ACCOUNTING/TAX SERVICE

Suite, Apt. #, Etc.

912 LITHIA PINECREST ROAD

City

BRANDON

State

FL

Zip Code

33511

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Ken Arena EA

REGISTERED AGENT MUST SIGN

Date 6/12/08

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	BEIZA DANIEL	228 BELFORT PLACE	VALRICO FL 33594
S	LEON OLGA M.	2010 BRANDON CROSSING APT # 301	BRANDON FL 33594
T	SALAZAR DORA	8518 GIBSONTON DRIVE APT # 46	GIBSONTON FL 33584
D	BEIZA DELMIS C	228 BELFORT PLACE	VALRICO FL 33594
D	MANZANARES IRIS	3104 LEONARD STREET	VALRICO FL 33594

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

x Daniel Beiza

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/12/08

CHURCH 813-677-0888

RA 813-341-2501

Date

Daytime Phone #