

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N24615

FILED  
Sep 26, 2005  
Secretary of State

**Entity Name:** MINISTERIO CATOLICO VERBO Y VIDA, INC.

**Current Principal Place of Business:**

541 SOUTH STATE RD 7  
SUITE #9  
MARGATE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

541 SOUTH STATE RD 7  
SUITE #9  
MARGATE, FL 33068

**New Mailing Address:**

**FEI Number:** 65-0046732      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

FITZGERALD, J. PATRICK  
110 MERRICK WAY, SUITE 3-B  
CORAL GABLES, FL 33134      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: FITZGERALD J. PATRICK

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: GRAZA, ROBERTO FR  
Address: 2310 MARTIN LUTHER KING BLVD  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VD      ( ) Delete  
Name: SANCHEZ, ARMANDO  
Address: 541 SOUTH STATE ROAD 7, STE 13  
City-St-Zip: MARGATE, FL 33068

Title: S      ( ) Delete  
Name: PEREZ, ESPERANZA  
Address: 1901 NE 41ST STREET  
City-St-Zip: OAKLAND PARK, FL 33308

Title: D      ( ) Delete  
Name: TAMAYO, RODRIGO  
Address: 541 SOUTH STATE ROAD 7, STE 13  
City-St-Zip: MARGATE, FL 33068

Title: D      ( ) Delete  
Name: TAMAYO, MIRIAM  
Address: 541 SOUTH STATE ROAD 7, STE 13  
City-St-Zip: MARGATE, FL 33068

Title: D      ( ) Delete  
Name: DE VILLIERS, LUIS  
Address: 541 SOUTH STATE ROAD 7, STE 13  
City-St-Zip: MARGATE, FL 33068

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 Section 119.07(3)(i), 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: ROBERTO GARZA

P

09/26/2005

Electronic Signature of Signing Officer or Director

Date