

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

98 JAN -9 PM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N26240

1. Corporation Name

IGLESIA PENTECOSTAL MONTE SINAI, INC.

W91000023291

Mailing Address

Principal Place of Business

22500 Old Dixie Highway
Goulds, FL 33170

22500 Old Dixie Highway
Goulds, FL 33170

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Mailing Address, If Applicable

3. New Principal Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

05/03/88

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0799280

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D/P	Pastor Ramiro Membreno	22500 Old Dixie Highway	Goulds, Florida 33170
D/VP	Antonio Velasquez	22500 Old Dixie Highway	Goulds, Florida 33170
D/S	Lydia Cancino	22500 Old Dixie Highway	Goulds, Florida 33170
D/T	Lucila Vega	22500 Old Dixie Highway	Goulds, Florida 33170
			100002398621--8
			01/13/98--01081--003
			****542.50 ****542.50

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

JOHN P. MAAS, ESQUIRE

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

LAW OFFICES OF HELLMAN & MAAS

Suite, Apt. #, Etc.

44 NE 16 Street

City

Homestead

State

FL

Zip Code

33030

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

John P. Maas
REGISTERED AGENT MUST SIGN

Date 10 / 06 / 97

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☒ (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Lydia Cancino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10 / 02 / 97

Date

Daytime Phone #

CR20040 (6/94)