

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N 28687**

1. Corporation Name

TEMPLO HISPANO BET-EL, INC

2. Principal Office Address

6001 S. MAIN Ave.

Suite, Apt. #, etc.

City & State

TAMPA FL

Zip

33611

Country

U.S.

3. Mailing Office Address

6001 S. MAIN Ave

Suite, Apt. #, etc.

City & State

TAMPA FL

Zip

33611

Country

U.S.

REINSTATEMENT 2003

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-2870661

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

MONTERO, THOMAS M.

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

6003 S. MAIN Ave

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33611

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

Thomas M. Montero

Date **10-3-03**

REGISTERED AGENT MUST SIGN

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
D	MONTERO, THOMAS M.	6003 S. MAIN Ave.	TAMPA FL 33611
D	MONTERO, CARMEN - J.	6003 S. MAIN Ave.	TAMPA, FL 33611
D	MONTERO, TOMAS C.	4429 W. PINTOR R.	TAMPA, FL 33616
D	CABRERA, JOSE	3904 ARINGTON Ave	TAMPA FL 33603
D	COLINDRES, MARLON	508 N. GOMEZ	TAMPA, FL 33606

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 under section 119.07(3)(i), 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:

Thomas M. Montero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-3-03 (813) 831-7783

Daytime Phone #

CR2E081 (10/02)

252

Templo Hispano Betel
6001 S. Main. Avenue
Tampa, FL 33616
(813)835-4755

October 3, 2003

Florida Department of State
Secretary of State
Division Of Corporations

Re: 2003 Not-For-Profit Corporation
~~Uniform Business Report~~
FEI Number: 59-2870661

Ladies and Gentlemen,

We ask that your office accept this letter with the attached copy of the UBR form in lieu of the original. We have not yet received an original. We have contacted your office by telephone to request new forms. As per your office instructions, we have used the internet forms.

We urge your office to accept this form and abate any penalties. Your time and consideration in this matter is greatly appreciated. If you have any questions, please feel free to contact us at the above stated number.

Sincerely,

Rev Thomas M Montero

Rev. Thomas M. Montero