	MA PLEASE READ	ALL INST	RUCTIONS	BEFORE C	COMPLET	ING THIS FORM.	
AP	PLICATION FOR:	FLORIDA	DEPARTMEN Katherine Ha Secretary of S	NT OF STATE	1	ma mor or im.	lofa
REINSTATEMENT DIVISION OF CORPORATIONS					-	FILED	
DOCUMENT# N37430					01 NOV - 7 PM 2: 26		
1. Corporation Name							
DEFENDERS OF THE CHRISTIAN FAITH CHURCH, THE NEW JERUSALEM, INC.						SECRETARY OF S TALLAHASSEE FL	ORIDA
Principal Place of Business Mailing Address						MECHINIO	
4528 NW 1 AVE PO BX 6100 MIAMI FL 33164 MIAMI BCH US US							
If above a	ddresses are incorrect in any way, line thro	ough incorrect in	formation and enter	correction below.			
			ng Office Address, If Applicable		Date Incorp To Do Busin	orated or Qualified ness in Florida	3/1990
Suite, Apt. #, etc. Suite, Apt. #,					5. FEI Number		Applied For
City & State City & State		City & State				65-0359517	Not Applicable
Zip	Country	Zip	Country	у	6. CERTIFICATE		dditional Fee required Certificate of Status
7. Names a	and Street Addresses of Each Officer and/o	or Director (Flori	ida nonprofit corpora	tions must list at lea	st 3 directors)		
Title(s)	(s) Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip	
PD FIGUEROA, RUBEN REV.			521 N.E. 142ND ST.			MIAMI FL 33161	
Ť	T FIGUEROA, IDALIA			ST.	***	MIAMI FL 33161	
DST	ALICANO, CARMEN	290 NE 163RD ST			MIAMI FL 33162		
			×1			000047194 -12/11/010109 ******61.25	90 004
						A A A	****61.25
S. Normand Address of Court Parish				A Manual A			
8. Name and Address of Current Registered Agent Name					9. Name and A	ddress of New Registered Agen	
FIGUEROA, RUBEN REV. Street Address				Street Address (P	O. Box Number i	is Not Acceptable)	CR2E040 (8/0)
521 N.E. 142 ST. MIAMI FL 33161				Suite, Apt. #, Etc.			
			į	City		State Zip	o Code
•	appointed the registered agent of the abov	e named corpora	ation, am familiar wit	h and accept the ob	ligations of Section		
e Gr						,	,
Signature of Registered A	Agent Signature (Signature)		-x - ()			Date	31
J	•	SISTERED AGE	NT MUST SIGN			Date	<i>392</i> *

11. 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:



Res.: (305) 895-3841

IGLESIA DEFENSORES DE LA FE CRISTIANA LA NUEVA JERUSALEN, INC.

fglesia: (305) 576-4561 4528 N.W. 1st Avenue, Miami, FL 33127

Rev. Ruben Figueroa, Pastor

November 02,2001

Florida State Dept. Division Of Corporations Anual Report, Reinstatement Section P.O.Box 6327 Tallahassee, Fi. 32314-6327

To whom it may concern;

The reason for this letter is to inform you that for the present year, we did not recieve our forms to renew our corporation. We called the number provided and as instructed we are mailing the amount of \$ 61.25 for reinstatement.

Please excuse as for this delay, the forms never arrived at our mail box or our temple. Thank you for your attention to this matter.

Respecfully Yours

Ruben Figueroa/Pastor

Carmen Alicano/Treas.