PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMS.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary & State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

SECRETARY OF STATE TALLAHASSEE, FLORIDA LA IGLESIA DE DIOS PENTECOSTAL OF MIAMI, INC. REINSTATEMENT 01-02 Principal Place of Business Mailing Address 2655 N.W. 115TH ST. 2655 N.W. 115TH ST. MIAMI FL 33167 MIAM! FL 33167 005556185----05/17/02--01009--<u>0</u>21 Date Incorporated or Qualified 1.25 *****61.25
To Do Business in Florida If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 01/.16/.199.1 Suite, Apt. # etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State ٠.,٠ 65-0297393 Not Applicable \$8:75 Additional Fee required for a Certificate of Status CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) City / State / Zip and/or Directors Officer and/or Director P COLON, VICENTE 2655 N.W. 115TH ST. miami fl D COLON, HIPOLITO 2655 N.W. 115TH ST. MIAMI FL COLON, FELICITA 2655 N.W. 115TH ST. Miami Fl HERNANDEZ, LUIS E. 9545 N.W. 5TH AVE. ---MIAMI FL 0005556185-8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name COLON, VICENTE Street Address (P.O. Box Number is Not Acceptable) 2655 N.W. 115TH ST. MIAMIFE 33167 Suite-Ant.# Etc--City State Zip Code 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.

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:

Signature of Registered Agent

Dec. 31, 2001

Date

Daytime Phone #

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