

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N50962

FILED
Oct 13, 2005
Secretary of State

Entity Name: TEMPLO ADONAI ASAMBLEAS DE DIOS, INC.

Current Principal Place of Business:

3600 MCNEIL ROAD
APOPKA, FL 32703

New Principal Place of Business:

3600 MCNEIL RD
APOPKA, FL 32703

Current Mailing Address:

3600 MCNEIL ROAD
APOPKA, FL 32703

New Mailing Address:

330 N. SHADOWBAY BLVD
LONGWOOD, FL 32779

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

VARGAS, CARMEN
330 N. SHADWO BAY BLVD.
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

VARGAS, CARMEN
330 N. SHADOWBAY BLVD.
LONGWOOD, FL 32779 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: CARMEN VARGAS

10/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VARGAS, DAVID
Address: 3600 MCNEIL ROAD
City-St-Zip: APOPKA, FL 32703

Title: SD () Delete
Name: ZALDIVAR, BETTY
Address: 3600 MCNEIL ROAD
City-St-Zip: APOPKA, FL 32703

Title: TD () Delete
Name: VARGAS, CARMEN
Address: 330 N. SHADAW BAY BLVD.
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: VARGAS, CARMEN
Address: 330 N. SHADOWBAY BLVD.
City-St-Zip: LONGWOOD, FL 32779

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: CARMEN VARGAS

TD

10/13/2005

Electronic Signature of Signing Officer or Director

Date