

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 DEC 21 PM 3:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N93000005178

1. Corporation Name

IGLESIA EVANGELICA PENTECOSTAL FUENTES DE AGUA VIVA, CORP.

Principal Place of Business

9660 SW 56 STREET  
MIAMI FL 33187  
US

Mailing Address

15406 SOUTHWEST 85 TERRACE  
SUITE 187  
MIAMI FL 33139  
US

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

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

11/12/1993

5. FEI Number

65-0449332

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	BATISTA, DOLORES	15479 SOUTHWEST 86 TERRACE	MIAMI FL 33193
VD	<del>BATISTA, DANIEL F</del> no more	<del>15479 SOUTHWEST 86 TERRACE</del>	MIAMI FL
SD	SAN MIGUEL, ESTRELLA	15406 SOUTHWEST 85 TERRACE 2240 SW 67th ave apt 1	MIAMI FL 33155
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8. Name and Address of Current Registered Agent

BATISTA, DOLORES  
15479 SOUTHWEST 86 TERRACE  
MIAMI FL 33193

9. Name and Address of New Registered Agent

Name  
*Lois Encilio Batista*  
Street Address (P.O. Box Number is Not Acceptable)  
831 SE 8 ST  
Suite, Apt. #, Etc.

City  
MIAMI  
State  
FL  
Zip Code  
33010

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

*Dolores Batista*

REQUIRED

REGISTERED AGENT MUST SIGN

Date

12/18/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes  No

(See other side for information on intangible tax.)

12. 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:

*Dolores Batista* ED, B.

12/18/98

Date

Daytime Phone #

CR20040 (8/98)