PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 MAR 07 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #N94 000 00 2700

1. Corporation Name
CENTRO de AVIVAMIENTO CRISTIANO, INC.
9165 SW 168 COURT
MIAMI, FL 33196

400005182314--0
-04/02/02--01030--005
****236.25 ****236.25

REINSTATEMENT 01-02

2. Principal Office Address	**3.** Mailing Office Address
7360 SW 24th STREET	
Suite, Apt. #, etc. #8	Suite, Apt. #, etc.
City & State MIAMI FLORIDA	City & State
Zip 33155 Country JADE	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida 5-18-1994

5. FEI Number 650495162 ☐ 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: REV. JOSE R. SANTAMARIA

05/16/01 90404 007
$61.25

Street Address (P.O. Box Number is Not Acceptable): 7360 SW 24th STREET

Suite, Apt. #, Etc.: 8

City: MIAMI State: FL Zip Code: 33155

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: JOSE RAMON SANTAMARIA Date: 3-01-02
REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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
P/D	REV. JORGE L. PORRAS B.	7360 SW 24th STREET #8	MIAMI, FL 33155
VP/D/P	REV. JOSE R. SANTAMARIA	7360 SW 24th STREET #8	MIAMI, FL. 33155
D	PAOLA SANTAMARIA	7360 SW 24th STREET #8	MIAMI, FL 33155
T/S/D	LEONOR T. LIVERO	7360 SW 24th STREET #8	MIAMI, FL. 33155

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: Rev. Jose R. Santamaria 3-01-02 (305) 364-6454
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Vice Pres.-Director-Pastor — Date — Daytime Phone #