

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

02 MAR 28 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



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

DOCUMENT # N 94000004454

1. Corporation Name
MINISTERIO CRISTO EN ACCION, INC.
(Cross Reference Name)
CHRIST MINISTRY IN ACTION, INC.

2. Principal Office Address 718 SW. 12 AVENUE Suite, Apt. #, etc.		3. Mailing Office Address 2262 N.W. 5 St Suite, Apt. #, etc.	
City & State MIAMI FL.		City & State MIAMI FL	
Zip 33135	Country DADE	Zip 33225	Country DADE

REINSTATEMENT 1995-2002

4. Date Incorporated or Qualified To Do Business in Florida Sept. 12, 1994	
5. FEI Number 01-0634367	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 HUMBERTO HERRERA	700005183447-4
Street Address (P.O. Box Number is Not Acceptable) 2262 N.W 5 St.	-04/02/02--01054--005 ****500.00 ****165.00
Suite, Apt. #, Etc.	700005183447-4
City MIAMI	-04/02/02--01054--005 ****500.00 ****165.00
State FL	Zip Code 33225

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 *Humberto* Date 3-01-2002
REGISTERED AGENT MUST SIGN

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
Pte/D	HUMBERTO HERRERA	2262 NW. 5 St	Miami, FL. 33225
VP/D	RIGOBERTO SANTOS	2262 SW 5 St	Miami, FL. 33145
Sec./D	Enid Digon	7225 W. 11Ct. Apt. 106	HIALEAH, FL 33014
			700005183447-4 -04/02/02--01054--005 ****165.00 ****165.00

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: *Humberto* Date 3-01-2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. MINISTERIO CRISTO EN ACCION, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☒	Reinstatement
☐	Trademark
☐	Other

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Examiner's Initials