

JAN-10-02 THU 12:53 PM AMM

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P.02

HO2000009346 6 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

01 JAN 10 PM 3:18

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N95000002391

1. Corporation Name

DIFUNDIENDO EL EVANGELIO CORP.

Principal Place of Business

29922
MIAMI FL 33126

Mailing Address

3820 N.W. 12TH STREET
MIAMI FL 33126

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

2. New Principal Office Address, if Applicable
7670 W 34th Court
Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable
Same
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

05/18/1995

City & State
Hialeah, FL 33018
Zip Country

City & State

Zip

Country

5. FEI Number

65-0588602

Applied For

Not Applied

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee req
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	4. City / State / Zip
PD	FERNANDEZ, DOMINGO	3820 N.W. 12TH ST.	MIAMI FL 33126
VD	CARRAZANA, DILIO	29922 S.W. 147TH AVE.	LEISURE CITY FL 33030
SD	FERNANDEZ, SAMUEL	5000 N.W. 4TH TERRACE	MIAMI FL 33126
TD	ESPINOSA, SANTIAGO	3210 N.W. 11TH ST.	MIAMI FL 33125

8. Name and Address of Current Registered Agent

FERNANDEZ, DOMINGO
3820 N.W. 12TH STREET
MIAMI FL 33126

9. Name and Address of New Registered Agent

Name
CARRAZANA, DILIO
Street Address (P.O. Box Number is Not Acceptable)
29922 SW 147th Ave.
Suite, Apt. #, Etc.

City
Leisure City,

State Zip Code
FL 33030

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.

Dilio Carrazana

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 01/03/2002

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.

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DILIO CARRAZANA

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/03/2002

Division of Corporations

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Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

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(((H02000009346 6)))

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : MART'S ACCOUNTING COMPANY
Account Number : I20000000048
Phone : (305) 545-9007
Fax Number : (305) 545-9075

CORPORATION REINSTATEMENT

DIFUNDIENDO EL EVANGELIO CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$297.50