

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1042

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 NOV 22 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000003170

1. Corporation Name

Iglesia Cristiana Nueva Vida, Inc.

REINSTATEMENT 03-04

2. Principal Office Address

30028 Orange Ave.

Suite, Apt. #, etc.

City & State

Sorrento FL 32776

Zip

32776

Country

3. Mailing Office Address

479 Wurst Rd.

Suite, Apt. #, etc.

City & State

Ocoee FL

Zip

34761

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-3359642

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

02/04/04 01055 004 122⁵⁰

7. Name and Address of Current Registered Agent

Name

AL Mayorga

Street Address (P.O. Box Number is Not Acceptable)

200 North Denning

Suite, Apt. #, Etc.

5

City

Winter Park

State
FL

Zip Code

32789

400028217144

12/01/04--01027--027 **9.25

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

REGISTERED AGENT MUST SIGN

Date 11/18/04

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	Luis A. Pluquez	479 Wurst Rd Ocoee FL 34761	Ocoee FL 34761
V.P.	Alberto Carbajar	705 Crystal Dr	Ocoee FL 34761
S.	Monserate Marcuno	1717 Montana St.	Orlando, FL 32803
T	Carmen Lebron	1717 Montana St.	Orlando FL 32803
ST	Luis Santiago	2367 Greywall Ave	Ocoee FL 34761

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-10-04

Date

Daytime Phone #

CR2E081 (01/04)



IGLESIA CRISTIANA NUEVA VIDA, INC.

30028 Orange Avenue
Sorrento, Florida 32779

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Rev. Luis A. Pluguez

Tel: (407) 656-7613

November 19, 2004

Re: Corporation Reinstatement
Doc. # N95000003170
Iglesia Cristiana Nueva Vida Inc.

To Whom It May Concern:

Enclosed, please find the reinstatement application for the corporation noted above. We had sent this application in February along with a check in the amount of \$122.00, check # 1077. I Monserrate Marcano secretary of Iglesia Cristiana Nueva Vida Inc. spoke with two of your customer service agents and was told that our application and check was received, but there was an area in the application, which was not completed. This information was sent back to us at our old address, in which we did not receive.

Please except this second reinstatement application along with a check in the amount of \$9.25, this was the amount given to me when I spoke to your agents. \$8.75 for the certificate and \$.50 that was short from our previous check.

Should you have any questions you can reach me by phone or via e-mail.
321-695-3874 or mmarcano51@yahoo.com

Thank you,

Monserrate Marcano

Monserrate Marcano

Note: Please send all correspondence to:

m. marcano
1717 montana St.
Orlando FL. 32803