PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED SECRETARY OF S.O.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	OIVISION OF CORPORATIONS 06 AUG -7 PM 4: 49
DOCUMENT # N98000 1. Corporation Name I glesia Pentecu Jesu cuisto huer	notal de na Esperanga, Inc	
2. Principal Office Address	9003/89/ 3. Mailing Office Address 4 /400 C/ARCON~ (000	ENSTATEMENT 04-06
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. Date Incorporated or Qualified
City & State - O CO ee	O coee	To Do Business in Florida 5. FEI Number Applied For 5-935-795-60 Not Applicable
Zip Country 3 4 7 6 1	3476 / Country	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
Street Address (P.O. Box Number is Not Acceptable) 26.67 Suite, Apt. #, Elc. City City State FL 325/8 8. 1, 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		
	d/or Director (Florida nonprofit corporations must list at le	· · · · · · · · · · · · · · · · · · ·
Titles Officers and/or Directors		r City / State / Zip
Direga José A River	·+h	100078728711 08/19/0601039022 ***8.75
		100078728711 08/15/0601039023 **358.75
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 filling 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 contained in Chapter 119, 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 TYPEO OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		