

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 NOV 24 AM 10:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N99000005033**

1. Corporation Name

**IGLESIA BAUTISTA DEL OMNIPOTENTE, INC.**

Principal Place of Business

Mailing Address

**7730 N.W. 183RD STREET  
MIAMI FL 33015**

**7730 N.W. 183RD STREET  
MIAMI FL 33015**

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

**08/24/1999**

5. FEI Number

**65-0958339**

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

**\$8.75 Additional Fee required  
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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	PIERDOMINICI, LUIS	7730 N.W. 183RD STREET	MIAMI FL 33015
VPTD	MEZA, DANIEL	7730 N.W. 183RD STREET	MIAMI FL 33015
VPSD	ROJAS, LORENA	7730 N.W. 183RD STREET	MIAMI FL 33015

**500024993615**  
**11/25/03-01002-010 \*\*61.25**

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**PIERDOMINICIA, LUIS  
7730 N.W. 183RD STREET  
MIAMI FL 33015**

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

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. or 617.0505, F.S.

Signature of  
Registered Agent

*[Signature]*

REGISTERED AGENT MUST SIGN

Date **11/08/03**

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.

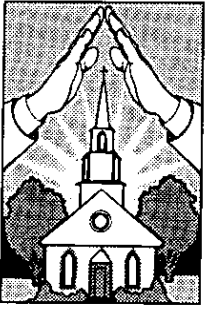
SIGNATURE

*[Signature]*  
**Luis D. Pierdominici**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**11/08/03**  
Date

**305-825-078**  
Daytime Phone #

CR2E040 (7/03)



# IGLESIA BAUTISTA DEL OMNIPOTENTE

"YO SOY LA LUZ DEL MUNDO" ... JN. 8:12

7730 NW 183 Street, Miami, Florida 33015 • Tel: 305-825-1078 • Fax: 305-512-4550

November 8, 2003

DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE FL 32314-6327

Attention: REINSTATEMENT SECTION

Dear DIVISION OF CORPORATIONS:

This letter is in regards to IGLESIA BAUTISTA DEL OMNIPOTENTE with Document number N99000005033 we did not received the two prior uniform business report notices, and we would like to reinstate the corporation. We are enclosing a check payment along with this letter and the renewal form. We appreciate your help with this matter.

Sincerely,

Luis Pierdominici, President