

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

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

FILED

01 AUG -6 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N 99000006802**

1. Corporation Name

**PRIMEIRA IGREJA ASSEMBLEIA DE DEUS
BRASILEIRA EM FORT MYERS, INC**

2. Principal Office Address

3615-CENTRAL AVE

3. Mailing Office Address

3615-CENTRAL AVE

Suite, Apt. #, etc.

2

Suite, Apt. #, etc.

2

City & State

FORT MYERS, FL

City & State

FORT MYERS, FL

Zip

33901

Country

LEE

Zip

33901

Country

LEE

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0962538

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

DOS SANTOS, MILDAIR V

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

3615-CENTRAL AVE.

Suite, Apt. #, Etc.

2

City

FORT MYERS

State
FL

Zip Code

33901

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 **7-18-01**

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-D	DOS SANTOS, MILDAIR V	3615-CENTRAL AVE #6	FORT MYERS, FL 33901
S-D	NUNES, CLAUDINEI	3615-CENTRAL AVE #6	FORT MYERS, FL 33901
V-D	MACHADO, ILVIL	3615-CENTRAL AVE #6	FORT MYERS, FL 33901
T-D	PEREIRA, GILSON J	3615-CENTRAL AVE #6	FORT MYERS, FL 33901

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

7-18-01

Date

Daytime Phone #

2082

July 18, 2001

Division of Corporations
Annual Business Report
P. O. BOX 6327
Tallahassee, FL 32314

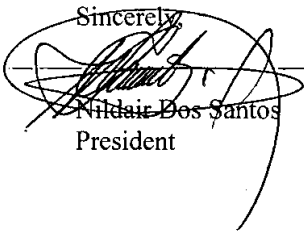
RE: Primeira Igreja Assembleia De Deus Brasileira Em Fort Myers, Inc.
Non-Profit/ FEI Number 65-0962538

Dear Sir/Madam:

As instructed by one of the division's agent, I am sending this letter to explain the reason for waiving the late fee. The annual report was never received by the organization. Therefore no payment were made to the Division of Corporations Enclosed are the filing fee of \$122.50 and the Application for Reinstatement.

Should you have any questions regarding the foregoing, please contact the undersigned.

Sincerely,



Nildaair Dos Santos
President