


2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

05 JAN 12 PM 2:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N99000007516	
1. Entity Name IGLESIA SENOR TODO PODEROSO (EL TABOR) INC.	

Principal Place of Business 1236 SW 29 AVE. FT. LAUDERDALE, FL 33312	Mailing Address 1236 SW 29 AVE. FT. LAUDERDALE, FL 33312
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

01102005 REIN-NP CR2E099 (6/04) *MRS*

4. FEI Number
65-1076259

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent CANALES, OVIDIO REV. 410 S.E. 16TH STREET APT. 3 FT. LAUDERDALE, FL 33316

7. Name and Address of New Registered Agent
Name Canales Ovidio
Street Address (P.O. Box Number is Not Acceptable) 410 SE 16 St.
Apt. 3
City Ft. Lauderdale FL Zip Code 33316

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Ovidio Canales* DATE: 1/10/05

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CANALES, OVIDIO REV. 4808 SE 12 CT #3 FORT LAUDERDALE, FL 33316 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600044635346 01/12/05--01047--017 **297.50 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, JUAN 1611 SW 30 STREET FORT LAUDERDALE, FL 33316 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEMENT 04-05 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, JESUS 1731 S.W. 32ND STREET FT. LAUDERDALE, FL 33315 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ovidio Canales* DATE: 1/10/05 DAYTIME PHONE #: (954) 822-5306

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR