

**2014 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N93000005509

**Entity Name:** INTERNATIONAL CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

2414 W. OAKLAND PARK BLVD  
OAKLAND PARK, FL 33311

**Current Mailing Address:**

PO BOX 5726  
FT LAUDERDALE, FL 33310 US

**FEI Number: 65-0455253**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ESPINOZA, LUIS  
890 NW 39TH STREET  
APT.#3  
FT. LAUDERDALE, FL 33309 US

*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.*

**SIGNATURE: LUIS ESPINOZA**

**12/18/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name DELTORO, JOEL  
Address 2414 W OAKLAND PARK BLVD  
City-State-Zip: OAKLAND PARK FL 33311

Title SD  
Name NEYRA, ROSA MRS  
Address 7390 N.W. 4TH STREET APT. 303  
City-State-Zip: PLANTATION FL 33317

Title D  
Name VERA, MANUEL  
Address 16234 N.W. 17TH COURT  
City-State-Zip: PEMBROKE PINES FL 33028

Title D  
Name FRYE, CLELIA  
Address 6807 NW 58TH STREET  
City-State-Zip: TAMARAC FL 33321

Title TD  
Name ESPINOZA, LUIS  
Address 890 NW 39 STREET  
APT 3  
City-State-Zip: FORT LAUDERDALE FL 33309

Title D  
Name SUAZO, GUSTAVO  
Address 2850 W. GOLF BLVD.  
APT.#109  
City-State-Zip: POMPANO BEACH FL 33064

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: LUIS ESPINOZA**

**TD**

**12/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date