

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **728777**

1. Corporation Name

CHURCH OF THE LUKUMI BABALU AYE, INC.

Principal Place of Business

2481 WEST 60 PLACE
#102
HIALEAH FL 33016
US

Mailing Address

PO BOX 2627
HIALEAH FL 33012

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

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/14/1974

5. FEI Number

NOT APPLICABLE

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	ERNESTO, PICHARDO L	2481 WEST 60TH PL STE102	HIALEAH FL
VD	CARMEN, PLA	2481 W 60TH PL #102	HIALEAH FL 33016
STD	PICHARDO, FERNANDO	2481 W 60TH PL #102	HIALEAH FL 33016
			900003067219--1 -12/13/99--01008--018 *****70-DO *****70-DO TTS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PICHARDO, FERNANDO
2481 WEST 60TH PLACE 102
STE 102
HIALEAH FL 33016

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.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date **Nov. 19, 1999**

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 AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Nov. 19, 1999 (305) 467-0027

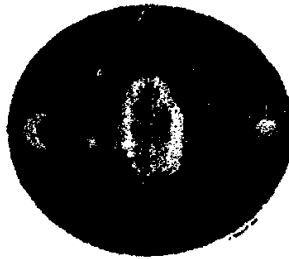
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2040 (8/99)



November 19, 1999

TO: Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

To whom it may concern;

As per my telephone conversation today with Leslie from your office, and at her request, I am enclosing the documents that she outlined as being necessary to reinstate our church to an active status.

Please find enclosed the following:

- 1) A photocopy of our original annual report filing dated August 21, 1999.
- 2) The application for reinstatement received in November 1999.
- 3) A check in the amount of \$70.00 dollars.

The original annual report was mailed on August 23rd., 1999 and the check has not been cashed. We did not follow it up because sometimes in the past it has taken a couple of months to receive the new certificates, so we assumed this was the case, until we received the notice of revocation which prompted our call and conversation with Leslie from your office.

If any further questions arise, do not hesitate to contact us at your earliest convenience.

Thanking you in advance for your cooperation and kind treatment. I remain.

Sincerely,

Fernando Pichardo, Administrative Director

CHURCH OF THE LUKUMI BABALU AYE

P.O. BOX 2627
Hialeah, Florida 33012

Phone: (305) 467-0027
Fax: (305) 558-6191
www.church-of-the-lukumi.org