

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 JAN 23 PM 4:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F03000003455

1. Corporation Name

HANNAH'S VOICE INTERNATIONAL MINISTRIE

2. Principal Office Address - No P.O. Box #

14437 Huntcliff Parkway

3. Mailing Office Address

14437 Huntcliff Parkway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32824

Country

USA

Zip

32824

Country

USA

7. Name and Address of Current Registered Agent

Name

Samuel P. Pawlak, Jr.

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

14437 Huntcliff Parkway

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32824

4. Date Incorporated or Qualified To Do Business in Florida 7/7/2003

5. FEI Number 36-4413782

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$6.75 Additional Fee required for a Certificate of Status

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Date 1/18/2009

REGISTERED AGENT MUST SIGN

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	Samuel P Pawlak, Jr.	14437 Huntcliff Parkway	Orlando, FL 32824
V/D	Shannon K Pawlak	14437 Huntcliff Parkway	Orlando, FL 32824
S/T/D	John D McCullough	2765 Scarborough Ct	Kissimmee, FL 34744
D	Steven L Goodner	529 Hillcrest Avenue	Titusville, FL 32796
D	Jermaine Rodriguez	1712 Creek Knoll	San Antonio, TX 78253
D	Aaron Wasik	1415 Londra Lane	Kissimmee, FL 34744

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 contained in Chapter 119, 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:

Samuel P. Pawlak, Jr. Pres. Dir.

Date 1/18/2009

407-492-8028

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #