

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 OCT -7 PM 1:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # NO1000002359

1. Corporation Name

Holy Faith Tabernacle, Inc.

500041775775  
10/11/04--01046--002 \*\*192.50

**REINSTATEMENT** 02-04

2. Principal Office Address

17635 S.W. 103 Ave  
Suite, Apt. #, etc.

3. Mailing Office Address

10372 S.W. 151 Terrace  
Suite, Apt. #, etc.

City & State

Perrine FLA

City & State

MIAMI FLA

Zip

33157

Country

DADE CO.

Zip

33176

Country

DADE CO.

4. Date Incorporated or Qualified  
To Do Business in Florida

4/3/2001

5. FEI Number

58-190-4466

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$975 Additional Fee required  
for Certificate of Status

7. Name and Address of Current Registered Agent

Name

Bishop Ronald Berry

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

10372 S.W. 151 Terrace

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33176

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

Bishop Ronald Berry (Clerg)

REGISTERED AGENT MUST SIGN

Date 10-2-04

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
Pres	Ronald Berry	10372 S.W. 151 Terr	MIAMI, FLA 33176
V. Pres	EARNESTINE BERRY	10372 S.W. 151 Terr	MIAMI FLA 33176
Sec	Sis BARBARA Coney	10334 FAIRWAY Light Blvd	MIAMI FLA 33157
Treas	Bro Solomon Heyward	14535 S.W. 105 <sup>th</sup>	MIAMI FLA 33176

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:

Bishop Ronald Berry (Clerg) 10-2-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #