

SE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

## FLORIDA DEPARTMENT OF STATE Secretary of State

**DIVISION OF CORPORATIONS** 

03 APR 22 PM 2:58

SECRETARY OF STATE TALLAHASSES FLORIDA

DOCUMENT # N01000005057

1. Corporation Name

JESUS SUPERNATURAL SWORD OF POWER MINISTRY # 1 INC.

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2. Principal Office Address	3. Mailing Office Address	7
51 N. DIXIE HWY	P.O. BOX 914	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	l
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City & State	City & State	Ţ.,
DEERFIELD BEACH, FL	DEERFIELD BEACH, FL_	╝
Zin Country	Zip Country	$\neg$

REINSTATEMENT 02-03

300016337723 04/21/03--01006--005 \*\*\*358.75

	4. Date Incorporated or Qualified To Do Business in Florida 7 / 1	7/200	1
Į	5. FEI Number		Applied For
4	NONE		Not Applicable
	6. CERTIFICATE OF STATUS DESIRED		ional Fee required Elicate of Status

7. Name and Address of Current Registered Agent							
Name							
TONY HALL REV							
Street Address (P.O. Box Number i	s Not Acceptable)			10.0			
511 N.E DIXIE H	IGHWAY						
Suite, Apt. #, Etc.			· · ·				
City			· · ·	State	Zip Code		
DEERFIELD BEACH				FL	33441		

8. I, being appointed the registered agent of	f the above named corporation, am famil	iar with and acce	pt the obligations of section 607.0	505 or 617.0503, F.S
	- 01	//		, ,

Signature of Registered Agent

REGISTERED

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Titles City/State/Zip Officers and/or Director D 51-1 NE- 38TH -STREET. -POMPANO BEACH, FL 33064 HALL, TONY D JOHNSON, ELIZABETH 1281 SW 6TH WAY DEERFIELD BCH, FL 33441 D SMALLINGS, SANDRA 1241 SW 5TH AVENUE DEERFIELD BCH, FL 33441 D THERETTA 511 NE 38TH STREET POMPANO BEACH, FL 33064 HALL, D DANNIELS, SHERYL 1281 SW 6TH WAY DEERFIELD BCH, FL 33441 LORAY, TAMARA 1980 NW 4TH CT PAMPANO BEACH, FL 33069

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TONY HALL

Daytime Phone #

3R2E081 (10/02